



MyVA Integrated Plan (MIP)
July 30, 2015

Contents

MyVA.....	3
Context	3
Measuring Success	6
Early MyVA Activities	7
Approach: Building a High Performing Organization	8
Horizon 1: Leveraging Existing Priorities	9
Horizon 2: MyVA as a Catalyst to Accelerate Change	11
Initial MyVA Accomplishments	12
Initial MyVA Priorities	13
<i>Veterans Experience</i>	13
Support Services Excellence	18
<i>Performance Improvement</i>	20
<i>Strategic Partnerships</i>	22
Regionalization as an Enabler for Integration	23
Horizon 2 Outcome Summary	25
Horizon 3: Optimizing and Scaling MyVA	27
Beyond the Horizons: Building a High Performing Organization.....	28
Sound Strategies: Development of the 2018-2024 Strategic Plan	28
High Performing Culture and Passionate Leadership	28
Robust Management Systems.....	30
Advisory Groups.....	31
MyVA Advisory Committee	31
Special Medical Advisory Group.....	32
Risks	32
Welcome to MyVA	33
Appendix A – VA Assessment via High Performance Organizational Model.....	34
Appendix B – MyVA Task Force: Decision Memorandum and Initial Operating Charter	35
Appendix C – MyVA Task Force Operations	38
Appendix D – Horizon 1 Initiative Descriptions.....	39
Appendix E– MyVA Initial Priorities Mapped to VA Strategic Goals.....	43
Appendix F - Capability Timelines.....	44

MyVA

MyVA is what we are calling our transformation from VA's current way of doing business to one that puts the Veterans in control of how, when, and where they wish to be served. It is a catalyst to make VA a world-class service provider. It will modernize VA's culture, processes, and capabilities to put the needs, expectations and interests of Veterans and their families first. MyVA represents an opportunity to affect fundamental changes in VA's systems and structures to align with our mission and values. ***The MyVA vision is to provide a seamless, unified Veteran Experience across the entire organization and throughout the country.***

A Veteran walking into a medical facility in Los Angeles, Detroit, or Fort Harrison should have a consistent, high-quality experience in each, from how warmly they're greeted to services delivered. To accomplish this, MyVA will build upon existing strengths to promote an environment in which VA employees see themselves as members of one enterprise, fortified by our diverse backgrounds, skills, and abilities. No matter what our pay grade or job responsibilities may be, we are one team and we will be empowered by our common goal of serving and honoring Veterans. Moreover, every VA employee—doctor, rater, claims processor, custodian, support staff, or Secretary—will understand how they fit into the bigger picture of providing VA services and benefits.

Context

VA serves more than 9 million of the 22 million Veterans in the United States. We provide Veterans with multiple services and benefits through our nine business lines, including: Medical Care; Medical Research; Disability Compensation; Pension; Vocational Rehabilitation and Employment; Education; Home Loan Guaranty; Insurance; and Memorial and Burial Benefits. VA has more than 320,000 full-time employees and operates 167 medical centers, 863 outpatient clinics, 300 Vet Centers, 56 Regional Offices, nine Regional Loan Centers, and 131 national cemeteries. Our budget has grown over the past several years to fund the facilities, services, and personnel required to care for our Nation's Veterans.

However, VA faces unprecedented demands for services and benefits. The service offerings themselves have multiplied over the years through expanded eligibility for existing benefits and new benefits programs. Both the number and types of benefits and services have expanded dramatically, and many Veterans have increasingly complex needs, expectations, and requirements of VA. Part of this is driven by Veteran demographics. In 1975, there were two million Veterans over the age of 65. By 2017 that number is expected to be near 10 million, the majority of whom served in the Vietnam era (see Figure 1).

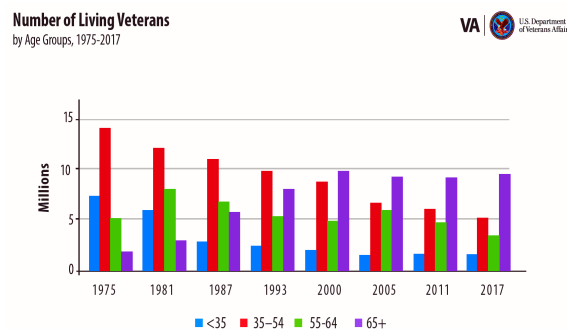


Figure 1. Changes in Veteran Demographics

As Veterans age, service-connected issues become more chronic and more acute. Additionally, service-connected issues for those returning from the wars in Iraq and Afghanistan are more complex than in prior eras. Demands for mental health care and suicide prevention are rising dramatically. The standards for care are changing, challenging our ability to meet expectations. Overall, this has increased the complexity in caring for America's Veterans: from 2009 to 2014, the average number of medical issues per compensation claim has risen dramatically, while the number of compensation claims went up 35 percent. At the same time, pressures are mounting to manage costs effectively.

This challenging environment required VA to re-examine its operating norms and institute new programs to meet these challenges. The Department's 2014-2020 Strategic Plan instituted a veteran-centric approach to services and benefits delivery. Further, it continued to focus the Department's fiscal year (FY) 2014 and FY 2015 Agency Priority Goals on the most pervasive issues facing Veterans, specifically increasing access to innovative health care and benefit services, eliminating the disability claims backlog, and ending Veteran homelessness. The following programs support those priorities.

- **Access to Innovative Health care.** VA is shifting the current culture of medical care from problem-based "sick care" to "*whole health care*," which engages and inspires Veterans to their highest level of health and well-being. VA also seeks to provide Veterans with improved access to all appropriate therapeutic services including complementary and integrative health services; health care professionals; and disciplines to achieve enhanced *chronic integrative health management*. VA has also begun a measurement-based approach to *mental health care* and mental health care management.
- **Increasing Memorial Affairs Access.** In 2014, VA experienced its 32nd consecutive year of increased interment workload, with a total of 125,185 interments, while maintaining an industry leading 96 percent customer satisfaction score.
- **Eliminating the Disability Claims Backlog.** In 2011, VA made a major commitment to address the disability claims backlog. This backlog was decades in the making, created by a number of factors including outdated paper and manual processes, a long war, the addition of new presumptive conditions¹ and, until 2009, no established standard to measure performance. VA has experienced increased productivity through the integration of all the initiatives that have contributed to our current electronic processing environment. These gains are evident in the record 1.32 million claims for disability-related compensation completed in the last fiscal year.

By moving to an electronic claims processing environment and increasing automation, and through the daily dedication of our employees who have worked overtime for the last several years to execute the plan, VA reduced the disability claims backlog from its peak of 611,000 in March 2013 to 128,000 in July 2015. That's a 79-percent reduction and the lowest it has been since 2009. We have also reduced the disability claims inventory from its peak of 884,000 in July 2012 to 385,000 earlier this year—a 56 percent reduction—while increasing claim-level accuracy from 83 percent in 2011 to 91 percent in 2015.

¹ VA presumes that specific disabilities diagnosed in certain Veterans were caused by their military service, due to the unique circumstances of their military service. In these cases, disability compensation can be awarded solely on the basis of that service, without the need to present additional evidence.

- **Ending Veteran Homelessness.** During the past five years we've reduced Veterans homelessness by 33 percent. In 2014 alone, 72,500 Veterans were placed in permanent housing or prevented from becoming homeless. Going forward, the Department of Housing and Urban Development (HUD) and VA aim for no Veterans to be living on the street, and no more than 12,500 Veterans to be living in some form of shelter (emergency shelter, treatment and transitional programs) and on a path to permanent housing. Ultimate success will be measured by the January 2016 Point-in-Time (PIT) count.

Despite these efforts and accomplishments, the past year has demonstrated we must do better. VA has been rocked by crises related to patient wait times; construction cost overruns; procurement and acquisition irregularities; and financial management missteps. These crises have caused some to lose trust in VA, while creating a lack of confidence within VA. More significantly, these events point to fundamental problems that we must address before even more devastating events emerge. Failure to act on our own to address these issues could result in catastrophic changes being thrust upon VA that could jeopardize our ability to meet the sacred commitments made to our Nation's Veterans. The time to act is now.

When Secretary McDonald began his tenure with the Department, he assessed existing programs and operations. As part of that assessment, he looked at the VA 2014-2020 Strategic Plan. He found that while the plan provided a solid framework for needed transformation, it wasn't being deployed effectively with adequate resources, performance plans, or metrics. Likewise, when he looked at the organizational structures and processes across VA, he found considerable gaps. The programs were largely being executed in organizational "silos" with little integration, resulting in inefficient operations. There was inadequate attention being paid to training, leader development, and succession planning. Additionally, leaders were often disconnected from employees. He also found that there were not adequate management systems in place to ensure effective and efficient operations of an organization the size of a Fortune 10 enterprise (please see Appendix A for the assessment). He came to the conclusion that a more comprehensive approach was needed, one based on a High Performance Organization Model (see Figure 2).

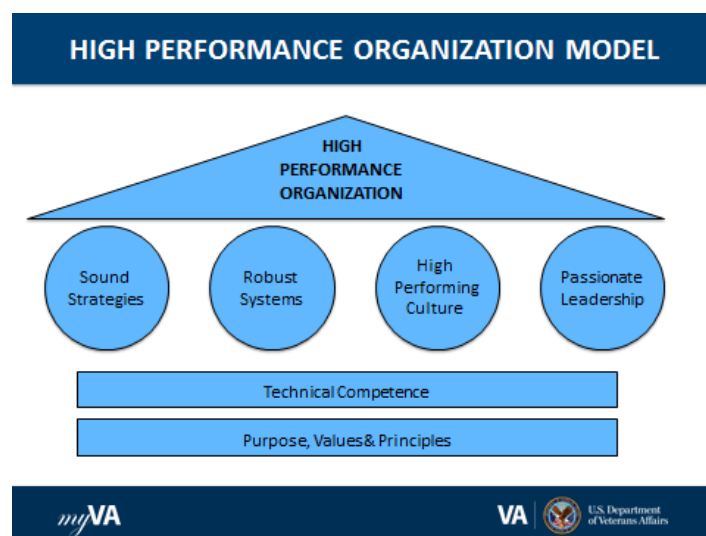


Figure 2. High Performance Organization Model

In the fall of 2014, Secretary McDonald announced the transformational movement, MyVA, with an emphasis on actually executing and cascading the principles embedded in the 2014-2020 Strategic Plan throughout the organization. The movement toward MyVA will also begin the process of building the high performing organization required to serve America's Veterans. "As we begin to create an organization that puts the Veteran in control of how, when, and where they want to be served, we will reorganize around Veterans' needs while integrating programs and organizations to optimize productivity and efficiency. Veterans will call it "MyVA," and it will be an organization that employees will be proud of."²

Measuring Success

This comprehensive transformation will have a wide-ranging impact on Veterans, their families, VA employees, and stakeholders. As a result, we have made improving the Veterans experience and improving the employee experience two of our proposed FY 2016/FY 2017 Agency Priority Goals (APGs)³. Additionally, we know that we owe it to the American people to be good stewards of the resources allocated to us.

For Veterans, Servicemembers, Families, and Survivors. The most important outcome for Veterans is their success after leaving military service. They should be thriving—receiving the health care they need; in meaningful, reliable employment; and secure in their prosperity. For MyVA, the outcome we seek is to make access to the care and services Veterans have earned predictable, consistent, and easy. We will gauge how Veterans view their partnership with VA as a measure of the effectiveness of MyVA's efforts. Indicators of progress around the Veterans Experience APG fall into three mutually reinforcing categories:

1. **Trust** in VA among America's Veterans
2. **Customer experiences** that are marked by effectiveness, ease, and positive emotion
3. The execution of critical customer-centric **enterprise projects**, sponsored by the Veterans Experience team at VA

For VA Employees. The most important outcome for employees is to feel engaged and empowered to create the highest level of impact every day. Each employee must have meaningful work and a clear view of its benefit to Veterans. Measuring how employees view their experience with VA will reflect the effectiveness of MyVA's efforts. Indicators of progress around the Employee Experienced APG include:

1. Ranking in the government-wide employee survey
2. Employee turnover (retention of 1 year)
3. Employee ratings of leadership effectiveness
4. Hiring rates

For American Citizens and Tax Payers. Through proper governance and transparent management systems, VA will again deliver effective services and benefits; be a good steward of fiscal resources; reliably protect personal information; and effectively anticipate and efficiently adapt to the future needs of our Nation's Veterans.

² "A MESSAGE FROM THE SECRETARY—MY VA," e-mail from Secretary Bob McDonald to VA employees, October 6, 2014.

³For discussion of Agency Priority Goals, see Office of Management and Budget (OMB) Circular A-11.

Early MyVA Activities

To begin the work of MyVA, we made countless visits to VA facilities and talked with employees across all levels and grades, including management and union representatives. We opened up “Idea House,” a crowdsourcing tool to capture ideas and suggestions from VA staff. We talked with Veterans and shareholders, including Veteran Service Organizations (VSO), members of Congress and their staffs, and state directors of VA. We spoke with staff at government agencies that had undergone similar transformations to gain knowledge and learn best practices. We also listened to our critics—we’re grateful for their insights and share their drive to make VA function at the highest level.

We heard firsthand about the confusion many Veterans feel when dealing with the Department. Information about benefits and services is often difficult to understand and inaccurate. Veterans are confused about their choices. While Veterans feel that VA health care is usually good to excellent, getting access to that care can be frustrating and burdensome.

The situation is frustrating for many VA employees as well. They sometimes lack the appropriate information required to provide the services they know our Veterans need. Our employees believe that VA’s organization and processes are often optimized around clerical work and bureaucratic methods rather than actual service to Veterans. Performance measures and incentives are not always aligned to Veteran outcomes or customer service. Support services to help them serve the Veteran are inadequate. Further, it is sometimes difficult to even determine who can make a decision to solve a problem. Employees told us that they often lack adequate resources, equipment, and training to do their jobs. They also felt hampered by inconsistent integration and cooperation between business lines.⁴

At the same time, we heard how important VA is to the Veterans and beneficiaries we serve. Veterans gave the working group example after example of the care, compassion, and excellent service provided by VA employees. Many Veterans feel that the care provided by VA is superior to that available from the private sector and that VA truly understands the unique concerns and problems faced by Veterans.

We used the information from the Secretary’s assessment, our site visits, and our conversations with stakeholders to develop the approach for MyVA. The Secretary chartered the MyVA Task Force in December 2014 to provide initial planning and capability building for MyVA. Its goal: “to orient all VA operations to the needs and expectations of our Veterans and beneficiaries.”⁵ It will act as an “incubator” for new capabilities and serve as a catalyst and laboratory for change. The Task Force provides the initial planning and design for new capabilities with the objective of transferring these capabilities to permanent sponsors within the Administrations and Staff Offices that will drive and sustain long-term transformation. (See Appendix B for the Executive Decision Memorandum and Initial Operating Charter, and Appendix C for a description of the Task Force’s role.)

⁴ Field Reports from Employee Engagement sessions.

⁵ MyVA Task Force charter and Executive Decision Memo, December 10, 2014.

Approach: Building a High Performing Organization

Several fundamental principles will guide our transformation and shape our approach. First, and most importantly, we will view change through the eyes of Veterans. It's their perception of our effectiveness and efficiency that matters the most.

Second, this restructuring is not change for change's sake. We will preserve and improve upon what's working well. That includes VA's unique competencies in health care, benefits delivery, and memorial affairs. But we will strengthen external partnerships to support service delivery, especially where our geographic reach is limited. There are many Veterans Service Organizations (VSO) providing excellent help to Veterans. VA's role is to leverage and integrate those efforts.

Third, this will be an employee-driven transformation. VA employees play a critical part in identifying challenges, crafting solutions, and, ultimately, delivering world-class services to Veterans. We will empower employees to be as effective as possible by providing world-class support. Fourth, we'll focus on integrating operations across business lines and organizations to improve service delivery and maximize efficiencies.

Finally, we will ensure continuous learning and improvement by anticipating future Veteran needs and demographics. By using the projected Veteran population demographics for 2025 in our designs, we'll be "skating to where the puck is going to be," making sure that we've laid the right plans to meet future demands to come.

This is an enormous undertaking and will not happen overnight. By revamping our functions to fit Veteran needs, rather than asking Veterans to navigate our complicated internal structure, we are rededicating ourselves to the proposition General Omar Bradley expressed in 1947:

"We are dealing with Veterans, not procedures; with their problems, not ours."

With these guiding principles in mind, our plan has three integrated elements, or horizons. First, in keeping with the principle that we "will preserve and improve upon what's working well," we plan to leverage those existing programs and initiatives that are delivering better services and benefits to Veterans. There is already a great deal of positive transformation taking place in VA and those efforts must be exploited and leveraged.

However, by themselves, current initiatives are not adequately integrated to achieve acceptable levels of customer service to Veterans, or to develop VA into a high performing organization. Thus, Horizon 2 of the transformation will focus on a relatively small set of catalytic efforts intended to accelerate the transformation that has begun. This set of efforts will be centered on five initial priorities expected to show significant and demonstrable progress in targeted areas by the end of 2016. Those initial priorities include:

- Improving the Veterans experience
- Improving the employee experience
- Achieving support services excellence
- Establishing a culture of continuous performance improvement
- Enhancing strategic partnerships

The third horizon is optimizing and scaling successful initiatives from the previous horizons, and growing small wins into big ones. This horizon will extend into and beyond 2017.

Throughout all of the horizons, we'll focus on management reforms creating a high-performing organization. Figure 3 illustrates the outline of our approach, working through the three

horizons, while concurrently investing in long-term capabilities that will enable sound strategies based on Veterans' needs, a high performing culture, passionate leadership, and robust management systems. The gray-shaded area shows the main points of discussion in this document.

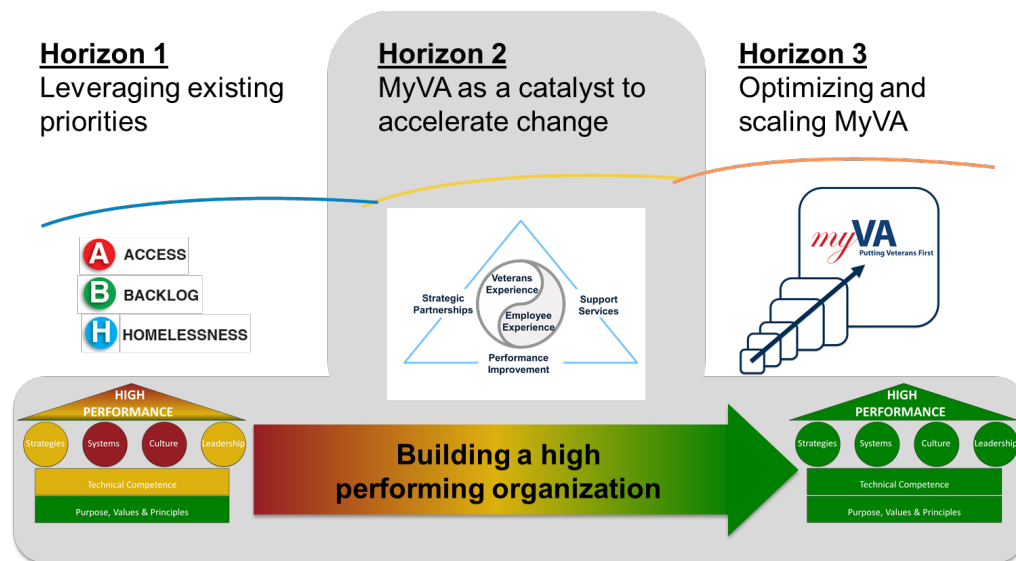


Figure 3. MyVA Horizons

The MyVA transformation will take place over several years, but Veterans and employees will benefit from many changes quickly, as new projects and services launch. We understand that this must be a flexible plan. We will monitor our progress and continue to listen to both internal and external stakeholders, and update this plan as new information is received to keep us aligned with evolving Veteran priorities and external factors.

Horizon 1: Leveraging Existing Priorities

The emphasis for Horizon 1 is on leveraging existing programs and initiatives that improve our relationships with Veterans. There are many initiatives focused on the delivery of superior benefits and services that are already resourced and being developed by organizations throughout VA. Some of those transformational initiatives are listed below. For a more detailed discussion of these programs, see Appendix D.

Access

- **Implementation of Veterans Health Administration (VHA) Blueprint for Excellence.** The Blueprint for Excellence is the detailed vision for the evolution of health care services provided by VA. (VHA)
- **Access Improvement Initiative.** In the past year, we've completed seven million more appointments for care inside VA and in the community than in the previous twelve months. Ninety-seven percent of our appointments are completed within 30 days and we've shrunk the electronic wait list by 55 percent. Meanwhile, we've hired over 1,000 doctors and over

2,700 nurses. VA will continue its focus on timeliness for outpatient care appointments. (VHA)

- **Whole Health Care.** As previously discussed, this transformation will result in higher patient and employee satisfaction, increased patient engagement and activation, improved health outcomes, and decreased cost. (VHA)
- **Chronic Integrative Health Management.** The Integrative Health Coordinating Center (IHCC) is leading the effort to identify, standardize, and operationalize integrated health therapies for all eligible Veterans. (VHA)
- **Mental Health.** As previously mentioned, VA has begun a measurement-based approach to mental health care and mental health care management. (VHA)
- **Vista 4.** Vista is VA's electronic health record (EHR) system. By December 2016, VA will achieve the 2014 National Defense Authorization Act (NDAA) requirements for interoperability of electronic health records in partnership with the Department of Defense (DoD). VA is making improvements to our scheduling system, including a simplified view of Veterans' needed appointments, and a graphical calendar display of available times and providers. This will allow schedulers to work more efficiently and provide better tools to manage access to care. Additionally, by September 2018, VA will have fully developed and deployed Vista 4. (VHA)
- **Welcome to VA.** In April 2014, the VA Health Resource Center began a pilot outreach program, Welcome to VA (W2VA), to provide Veterans enrolled by VA's Health Eligibility Center a personal introduction to VA health care services, programs, and resources. The program was fully implemented July 1, 2015. (VHA)
- **Leveraging VHA Vet Centers.** VA will increase readjustment counseling services to eligible Veterans, Service members, and their families through improved oversight and targeted improvement in lower-performing Vet Center teams. (VHA)
- **Increasing Memorial Affairs Access.** To increase Veteran access to burial needs, we are currently undertaking the largest expansion since the Civil War, with plans to establish 18 new cemeteries by the end of 2020. (National Cemetery Administration (NCA))
- **Employment.** VA will continue facilitating innovative employment opportunities for Veterans. (Veterans Benefits Administration (VBA))
- **Increasing Access to VA Benefits and Services.** VA is working to expand and integrate access to all services and benefits, including having a VBA presence in all VA Medical Centers. As a first step toward achieving this goal, VA is implementing **Tele Benefits, also known as Click to Benefits.** (VBA)
- **Memorial Affairs Legacy Initiative.** By December 2016, VA will develop new educational programming (at least five multimedia lesson plans) that leverage the historical resources of our national cemeteries to memorialize Veterans. (NCA)

Backlog

- **National Work Queue (NWQ).** The National Work Queue is a paperless workload management initiative designed to improve VBA's productive capacity and claims processing workflow. (VBA)

- **Improving Appeals Experience.** Veterans will see an increase in the transparency and overall ease of experience with the appeals process. (BVA)
- **Maximization of Appeals Board Hearing Dockets for Veterans.** VA is taking steps to increase Veteran awareness of the impact of electing to participate in an appeals board hearing, and increase use of available hearing dockets. (BVA, VBA)

Homelessness

- **Ending Veteran Homelessness.** VA remains committed to ending and preventing Veteran homelessness, which would mean no Veterans sleeping on our streets.

In total, these efforts will significantly improve Veteran Experience at VA. They set a solid foundation for fundamental change, but by themselves, they are not adequate to achieve the change we seek.

Horizon 2: MyVA as a Catalyst to Accelerate Change

Horizon 2 emphasizes improving our relationships with Veterans, but it also takes explicit steps to focus on empowering our employees, while enabling better business and management systems across the enterprise to build toward becoming a high-performing organization. Our analysis has led us to focus on the five initial MyVA priorities depicted in Figure 4.

Our world view and strategies will shift from internal to external, focusing more intentionally on the Veteran experience with VA. We have recently completed initial Veteran Experience studies using Human Centered Design techniques. We are building on this work to develop in-depth information on those we serve, carefully assessing their needs and expectations. What we learn will inform the planning and design of our operations to provide far better Veteran experiences.

As Figure 4 illustrates, the Veteran experience cannot be decoupled from the Employee experience. VA employees are the face of VA. Employees provide the care, the information, and the access to earned benefits for our Veterans and their families. We are going to make it easier for them to provide feedback and ideas to help improve the way we do business. We will remove barriers that impede their daily mission by giving them the tools, training, and information to be technically competent and provide top-quality service. We will provide career and succession planning to support a high-performing culture. And we will invest in leadership development to build capable and passionate leaders.

In support of these central priorities, we have identified three complementary and reinforcing efforts to help build more robust management systems, enhance productivity, and deliver more effective outcomes. We are improving the Support Services our leaders and employees rely on

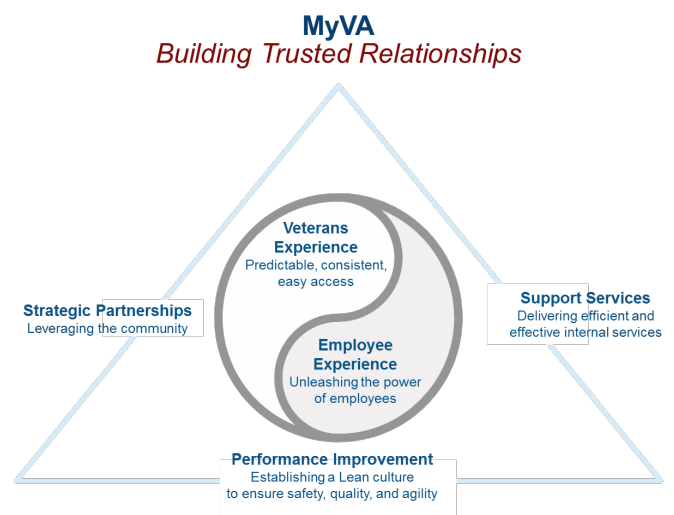


Figure 4. MyVA Initial Priorities

so that they are able to devote their efforts to supporting Veterans, not dealing with back office issues. The Performance Improvement area supports the others by providing a Lean strategy⁶ for process improvement and tools to help employees look at their processes in a new way to improve them for both coworkers and those we serve. We are also increasing our emphasis on Strategic Partnerships to allow us to extend the reach of services available for Veterans and their families. (Appendix E shows the relationship of these efforts to VA Strategic Objectives.)

We must rebalance the relationship between headquarters and field operations. This means striking the right balance between standardization and autonomy. Our headquarters staff should provide the foundational strategies, concepts, and policies used to run the Department; our field staff should be given the freedom to tailor this guidance to local conditions. We want consistency, but not at the expense of good judgement. We need feedback loops to ensure that we are developing sound policies and following them appropriately. We will balance efficiency and effectiveness with excellent customer service to our employees.

These five initial priorities work together to create a new state of mind for VA. While today VA has many great employees and pockets of excellence, MyVA seeks to create an environment where best practices are consistently implemented. VA systems and processes will support this improved Veteran-centric culture, and employees' behaviors towards Veterans and fellow employees will reflect this new MyVA mindset.

Initial MyVA Accomplishments

The MyVA transformation is just beginning, but significant initial steps have been taken to demonstrate our commitment to change and gain momentum. To start, we asked all employees and leaders to reaffirm their commitment to our core values of **Integrity, Commitment, Advocacy, Respect, and Excellence**. We also affirmed the personal meaning of those values: I care about those who have served. I care about my fellow VA employees. I care about choosing "the harder right instead of, the easier wrong."⁷ I care about performing my duties to the very best of my abilities.



Demonstrating that this is an employee-driven transformation, our employees are contributing great ideas to improve our services. We have started several initiatives based on their ideas:

- **Improving Customer Service at Call Centers.** Benefits call center employees suggested allowing call center personnel, in certain circumstances, to stop and start benefits and add or subtract dependents for Veteran callers. VA leadership quickly made this policy change. Today, over 26,000 Veteran families have been able to add or subtract dependents on the phone instead of having to wait for a written response. (VBA)
- **VA 101 Training.** Based upon feedback that employees did not have adequate understanding of VA's history or service offerings, we have built and piloted training to build their knowledge of critical VA and Veteran-specific topics. Training began in April 2015 and will be conducted at 60 sites to more than 60,000 employees by the end of FY 2015. This

⁶ Refers to lean manufacturing or lean production, often simply "lean," which is a systematic method for the elimination of waste within a manufacturing process. Lean also takes into account waste created through overburden and waste created through unevenness in workloads. **Lean techniques have been applied to processes outside of manufacturing with great success.**

⁷ Reaffirmation of Our Mission and Values," message from Secretary McDonald to VA Employees, August 7, 2014

training was designed by and for employees and will become part of VA's routine onboarding training. (MyVA Task Force)

- **Improving Audiology and Optometry Appointments Access.** An employee noted that current VA processes require Veterans to first see a Primary Care Physician before being referred to an Audiology and Optometry specialist—even for routine appointments. This delays Veteran access to routine hearing and eye care appointments. VHA has created a pilot program in three VA Medical Centers across the country to allow Veterans to directly schedule appointments with Audiology and Optometry. Initial results show improved access and decreased wait times. The results of these pilots will be used to shape a national rollout. (VHA)
- **Modernizing the Veterans Crisis Line.** We are transforming the Veterans Crisis Line (VCL) into a world-class crisis call center, providing 24 x 7, 365 day-a-year prevention and crisis intervention and support through a state-of-the-art information platform. VCL employees participated in two Rapid Improvement Workshops and helped identify quick actions to improve both the Veteran experience and their own resiliency and work environment. Changes included enhanced staffing and piloting of new telephone systems to ensure calls are routed directly to VCL rather than Veterans having to hang up and dial another number. Additionally, robust programs are being put in place to improve employee wellness. (VHA)
- **Memorial Affairs Pre-Need eligibility.** Currently, VA determines burial eligibility for Veterans and other eligible individuals at their time of need. Pre-need eligibility determinations will ease the burden on Veterans and their by allowing them to know in advance whether they're eligible for burial in a VA national cemetery. This permits Veterans and their families to plan funeral details while they are still living and reduces stress for loved ones during the time-constrained period before burial. (NCA)
- **Elimination of Printing and Mailing of Certain Monthly Reports.** Based upon an employee suggestion made to the IdeaHouse, VA will be able to save approximately \$300,000 per year by not printing and mailing some human resources reports that are available online. The savings will be spent on service to Veterans. (Human Resources and Administration)

Initial MyVA Priorities

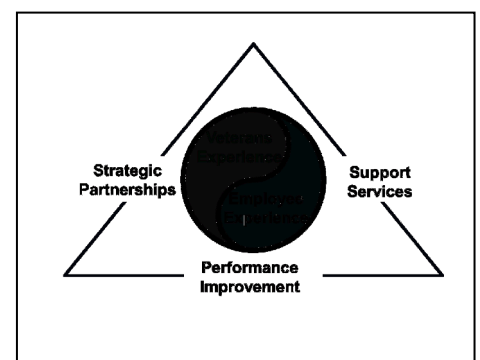


Veterans Experience

Supporting VA's delivery of excellent care and benefits experiences focused on the needs of our customers: Veterans, their families, supporters, and communities

VA is creating a Veterans Experience office (VEO) to support our employees in the delivery of excellent health care and benefit experiences. This office, in close coordination with VA's Administrations and staff offices, is creating new capabilities in VA to transform processes and services across the organization and throughout the nation. We strive to make every contact Veterans and their families have with VA consistent, effective, and efficient, whether in-person, by phone, online or by postal mail.

Employing Human-Centered Design principles, we have studied both Veteran and employee needs that will drive how services can be streamlined and new methods developed. Geared at everyone from the top manager to the most junior employee, customer service training and materials are in



development to make sure the right support is given to our employees working directly with Veterans. Additionally, we're developing benchmarks and implementing metrics for measuring our efforts against national standards of excellence, so we'll know if what we're doing is working and if it's working well. We're also leveraging the efforts of community Veterans organizations that have worked hard to fill gaps and help Veterans navigate VA's complicated structure.

The Veterans Experience team is responsible for several VA-wide initiatives that will transform our ability to offer an excellent and consistent Veterans Experience. These initiatives will simplify the experience for Veterans to make VA easier to understand and access:

- **Customer Data Integration (CDI).** Our first step is understanding who our customers are and how we're serving them. Through CDI, each VA business line will have a single, shared view of Veterans, regardless of where they live and no matter how many different VA facilities they've visited. This will also let us communicate with Veterans thoughtfully, respectfully, and without redundancy. In conjunction, we're developing a comprehensive menu of benefits and services that employees and Veterans can use to clearly understand the benefits and services that each Veteran has earned. (VEO)
- **A Unified Digital Experience.** VA is designing a single, unified digital experience so Service members and Veterans can manage the majority of their interactions with VA by smartphone or computer. By fall of 2015, we'll launch the first iteration of vets.gov, a unified site allowing Veterans to learn about benefits they've earned and offer a clear path for applying for them. Through 2016, we'll be designing, building and testing robust functionality and features, so by June 2017, Veterans will be able to check the status of their claim, schedule an appointment, or change their address online. This project is greatly benefitting from the participation from Veterans who serve as a testing group. (VEO)
- **VA 311 Contact Center Operations.** VA is studying how to improve the services provided to Veterans through VA's call centers. Currently, over 200 VA call centers manage calls made to over 950 1-800 numbers. Our goal is to develop an integrated, enterprise approach to contact centers, beginning with the establishment of a "VA311" resource. Veterans will be able to make just one call and be connected to the customer service representatives who can address their needs.

For example, by December 2016, a Veteran or a family member calling VA311 for information about fiduciary services would be connected with the **VBA National Fiduciary Call Queue** where they would be able to speak to a professional able to answer their questions about this complex topic. Part of the contact center strategy will be transitioning certain **Call Centers into Service Centers** to provide the benefits and services that satisfy Veterans' needs in the most efficient and effective way. Veterans will be able to update contact and other profile information through a single point-of contact. This will expand Veterans access to services and help integrate Veterans data across all VA systems. It will increase secure electronic communications with Veterans. It will begin the transition of select call centers into direct service delivery providers, offering more personalized, on-the-spot resolution to questions. (VEO and VBA)

- **MyVA Communities.** VA is strengthening services to Veterans in local communities by identifying leading private service organizations and partnering with them to build effective networks of local Veteran support. VA facility directors will be engaged and active participants, and can address local concerns from Veterans and other stakeholders. We

have set an ambitious goal of establishing 100 MyVA Communities by December 2016. (VEO)

- **Customer Service Program.** Today, there is no consistent approach to delivering great customer service at VA. We've been studying the best practices of America's top private companies to learn how they excel at delighting their customers. They've shared their best practices with us, so we can create a best of class program for frontline employees. Our goal: delivering consistent, high-quality service to every Veteran—a cornerstone to building trusted, lifelong relationships with Veterans that respects their service. This effort will span five areas: defining great customer service, developing frontline employees, developing great supervisors, measuring customer experience and employee experience, and running a great shift. We will partner with Veterans and facilities in the field to create solutions that work for both customers and employees. (VEO with VBA and VHA facilities)
- **Department-Wide Customer Experience Measurement.** While various measures of customer satisfaction exist within individual VA product and service lines, the Department lacks an integrated approach to assessing customer experiences. The VE team is working to design a coherent measurement framework that prioritizes innovation to support continuous improvement and serves as a basis for directing departmental resources where they will be most valuable to our customers. This will also help us better understand whether and how our people and our programs are building trust in VA to fulfill our country's commitment to Veterans. (VEO)
- **Veterans Experience Organization including National Field Team.** A small national Veterans Experience team supports the creation of easy, effective Veterans experiences through five key functions: Insight and Design; Measurement; Operations and Governance; Advocacy and Navigation; and Enterprise Access and Integration. The national office will also support field operations via human-centered design efforts and customer journey mapping; defining appropriate and useful metrics; and incorporating Veteran and employee insights. Five District teams—each to be led by a District Veterans Experience Officer—will leverage support from the national team and work directly with facility directors and supervisors across the organization. These field offices will also facilitate the development and operations of the MyVA Communities. Figures 5 and 6 shows Veterans Experience's national and district organizations, respectively. (VEO)

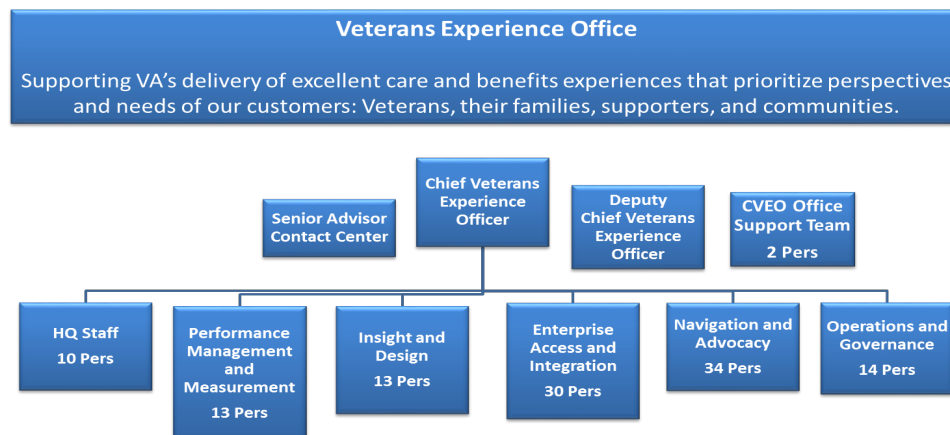


Figure 5. National VEO Organization

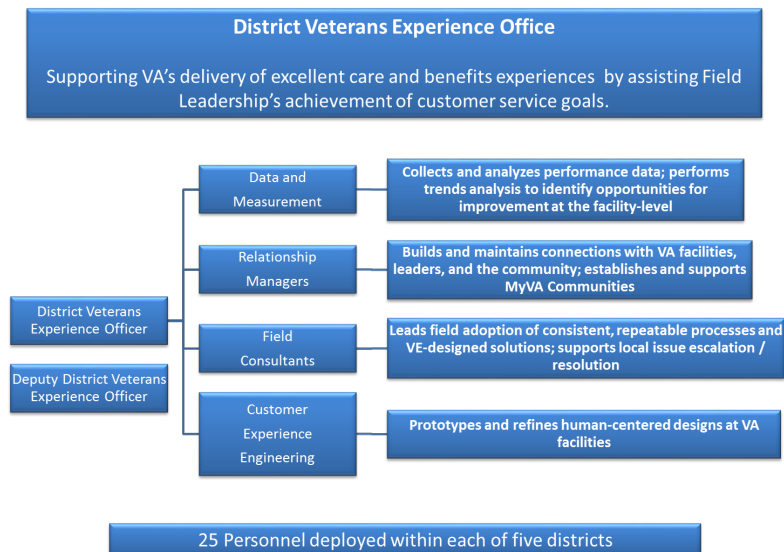


Figure 6. Typical District Veteran Experience Office

Employee Experience

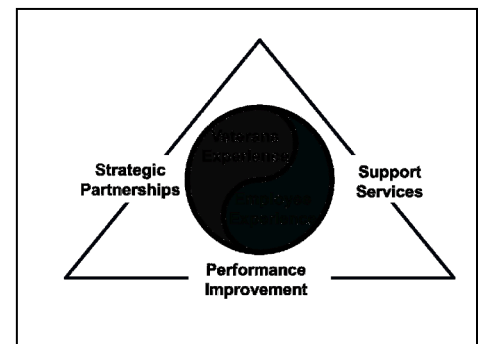


Building a collaborative, inclusive and results-oriented culture that inspires trust in order to improve the Employee Experience

VA will improve the Employee Experience (EE) by creating a collaborative, inclusive experience that inspires and empowers all VA employees to deliver world-class customer service while demonstrating a sense of pride and achieving their full potential. VA is developing programs and activities to facilitate leader understanding of organizational culture tenets and people skills that support their ability to better engage employees. These programs and activities will enable leaders to identify and influence critical elements of culture and climate that directly contribute to excellent Veteran service and support to the MyVA vision.

EE initiatives ensure every VA leader and employee accepts personal responsibility and accountability to deliver superior customer service and act in ways that demonstrate their commitment to serving Veterans, each other, and other stakeholders. Developing and consistently implementing rewards programs to recognize employees and leaders who model desired behaviors and achieve desired outcomes for Veterans.

Improving the EE also requires reducing vacancies and developing streamlined standards for workforce planning, recruiting, and hiring processes so that VA attracts, hires, and retains high-performing candidates. Doing so enables VA to fill mission critical positions and ensure succession planning is in place.



Continuous learning opportunities, linked to key competencies and competency gaps, will build an agile workforce and transform VA into a true “learning” organization. A consistent method for developing competency models, defining career paths, and identifying career development opportunities will ensure that employees have the right skills to perform their jobs and are engaged by their leaders to innovate and improve.

To accomplish these outcomes, the leading Employee Experience initiatives are:

- **Develop Leadership Excellence.** VA will develop world-class management teams, starting with a Senior Executive Service (SES) capable of leading change and leaders at all levels who commit to hold themselves, their employees, and each other accountable to deliver world class customer service. In order to do so, we will develop engaged “servant leaders” responsible for establishing an organizational culture rooted in VA Core values that inspires and empowers all employees. As previously mentioned, this “Employee Experience” outcome is an FY 2016/2017 APGs. To develop VA leaders, we will also refine the SES Candidate Development Program for GS 14/15 employees; implement “workout” as a leadership tool in FY 2015 and FY 2016; expand the 4 week Leadership VA (LVA) program for GS13 and above in FY 2016; expand enrollment in the Aspiring Leaders Program for GS 9-12 in FY 2016; and expand the Corporate Employee Development Board (CEDB) program for GS 13-15 in FY 2017 with the Federal Executive Institute, George Washington University, Harvard University, University Maryland, and Graduate School USA. Additionally, beginning in FY 2015 many of these leadership programs have incorporated MyVA topics into their learning curriculum, to include LVA in which 80 top performers have formed 12 teams executing discreet MyVA related projects.
- **Engage Employees and Improve VA Culture.** VA leadership will engage and empower employees to improve themselves and the organization, while delivering seamless, integrated, and responsive VA customer service experience. To achieve this outcome, we have already distributed Employee Engagement Playbooks, supported by webinar training; implemented an Executive Seminar Series; initiated department-wide town hall meetings; and initiated a Human Resources (HR) newsletter for all VA employees. Moving forward into FY 2016, we will expand CSEMO Connect, a collaborative website created exclusively for the Senior Executive (SE) Community.

Every VA leader and employee is responsible and accountable to cultivate and shape VA’s organizational culture. To achieve this outcome, VA will establish the Anti-Harassment Office in FY 2015; institutionalize the Secretary’s Honors Awards program in FY 2016; begin the President and Secretary, Veterans Affairs (SECVA) Customer Service Awards in FY 2015 and institutionalize them in FY 2016; complete a Culture Case Study in FY 2015; strengthen Union Partnerships by expanding the number of viable Labor Management Forums in FY 2016; implement performance measures to cascade VA enterprise wide goals and objectives by FY 2016; and strengthen VA Leadership Training Programs.

- **Attract and Retain High Performing Candidates.** VA must recruit and retain effective leaders; fill mission critical occupations (high need) and key leadership positions; recruit and hire a high-performing workforce; and retain high-performing employees. In order to do so, we will continue implementation of HR Smart in the remainder of FY 2015 and in FY 2016; increase the number of Veteran Employment Specialists in VA Districts beginning in FY 2015; implement an Automated Performance Management System in FY 2015 and FY 2016; expand the PATHWAYS program to hire interns and recent college graduates in FY 2016; and

continue the pursuit of creative hiring/retention procedures within statute/regulatory requirements. We will track our progress in the Performance Management System, HRStat, HR Dashboard, and Monthly Performance Reviews.

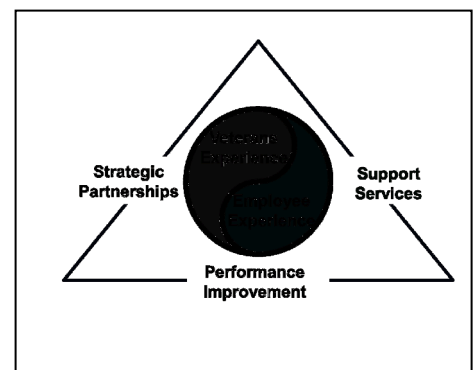
- **Develop Employees.** VA will establish standardized training and development frameworks to ensure employees have the right skills and tools to perform their jobs and deliver world class customer service. To achieve this, we will improve our customer service training (Customer Service Competencies, Courses, Mandatory Training, and SES Performance Plans cascaded down through all employee performance appraisals) by FY 2016; certify HR professionals at the HR Academy beginning in FY 2015; establish a Veteran Retention Working Group to develop and implement a retention strategy by FY 2016; and expand the use of MyCareer@VA (Career Mapping Tool, Résumé Builder, Career Fit Tool, Virtual Mock Interview, VA Career Guides) during FY 2016 and FY 2017. We will also provide employees with additional learning opportunities to assist them in reaching their full potential. We will measure our success by using the Kirkpatrick Scale and Education Dashboards.



Support Services Excellence

Optimizing the organization, functions and activities of VA's core support functions that focus on delivery of world class services to VA facilities and organizations that directly serve Veterans

The Support Services Excellence (SSE) priority addresses VA's internal operations: the mission support functions provided internally, especially to VA employees who directly serve Veterans and their beneficiaries. Simply stated, better support to VA employees for services such as HR, information technology (IT), Legal Services, Public Affairs, Congressional Affairs, finance, purchasing, and logistics means better and more efficient service for Veterans. Better support for our physical environment and assets, through security and preparedness, real property management, and leasing support, also creates a better and safer environment and experience for Veterans and their families.



SSE activities will address legislative, policy, procedural, perceptual, and cultural barriers that constrain our employees' abilities to effectively deliver Veteran benefits and services. Streamlining and sharing of costs associated with internal services will also be a crucial part of creating a more flexible, responsive, scalable and efficient infrastructure focused on delivery of services to VA facilities. Support service performance benchmarks for cost, quality, and customer service for all mission support functions will be established based upon best-in-class organizations in the private and public sectors, and will be measured for consistent and constant improvement.

SSE intends to increase operational effectiveness by replicating support service best practices; reengineering and standardizing support service processes across the enterprise; establishing service level agreements (SLA) with clearly defined performance metrics and targets; establishing customer-driven governance frameworks; and through technology enablement and performance management techniques. This also involves building common standards for underlying support service activities and systems and driving out redundancies. SSE will enable VA to leverage economics of scale, increase employee productivity, and gain operational

efficiencies. It will free up VA's business lines to focus directly on their core mission and to use resulting increased capacity to improve Veteran-facing services. SSE will result in an enterprise-wide culture change driven by customer service, enabling both greater employee and Veteran satisfaction.

Within the context of the MyVA vision, VA will transition to a shared services environment those services where it makes business sense to do so; achieves greater departmental efficiencies, synergies, and productivity; eliminates unnecessary duplication; or enables a better outcome for Veterans. Across the landscape of support services, where it makes sense to consolidate services, we will. Where it makes sense to use national contracts or shared service delivery methods, we will. Where it makes sense to keep the service delivery decentralized, focused at the facility level, we will. By identifying "mission support" transactional services that can be more effectively shared across the Department or by bringing together scarce, highly specialized expertise services into centers of excellence, VA will achieve greater leverage of its resources and economies of scale. In coordination with the Performance Improvement team, SSE will leverage continuous performance improvements and Lean Six Sigma approaches to improve the timeliness, quality, and reduce the costs of support services.

Progress is already being made. In June 2015, the SSE team completed "as-is" assessments of our HR, Finance, IT, and Procurement functions and initiated improvements to resolve mission-impacting challenges in security and preparedness, medical supply chain, and medical staffing processes. SSE is securing support for greater sharing of services across VA, baselining and benchmarking service to understand the opportunities for increased performance, articulating the value proposition and business case for a shared service model, and developing a plan and governance framework to guide our implementation.

A Support Services Governance Council will be established this fall to determine the functions and services to be provided using a shared services approach and oversee their delivery and ongoing operation. By December 2016, that Governance Council will have reviewed all the support services provided at VA and determined which are best provided using a shared services model. SSE will also establish key foundational structures important to adoption of a shared service model of delivery, including: organizational designs, service portfolios, funding, and service level agreement models to enable ongoing operations. SSE will seek approval from the Support Services Governance Board for each key decision along the way, providing data-driven evidence for its recommendations. Most importantly, SSE will proceed with this transformation in an open and collaborative manner, involving stakeholders so that there is a shared understanding and commitment to SSE's success. To support these efforts, SSE is soliciting for a commercial contract to leverage best practices in private and public sectors to assess, design, build, implement, and optimize a shared service model for VA.

While we focus on long-term analysis and implementation of critical support service functions, SSE will sponsor pilot projects during Horizon 2 to work on process improvements in key areas, to include fixing issues that have been highlighted as recent problems. Near-term efforts include:

- **Security and Preparedness.** VA is working on 12 specific actions to be completed by December 2016 to ensure Veterans and employees have a safe and secure environment. These actions include standardizing VA police operations; upgrading equipment; enhancing preparedness planning and training; and implementing improvements to physical security,

emergency management, and workplace violence prevention programs. (Office of Operations, Security, and Preparedness (OSP))

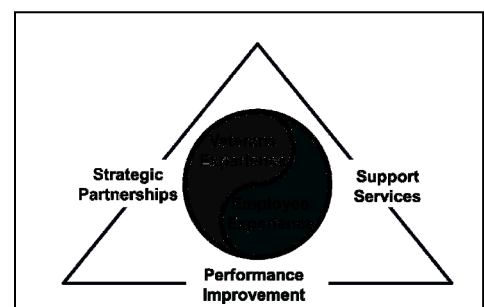
- **Supply Chain Modernization.** Our pilot on supply chain modernization will improve our services by aggregating requirements and awarding strategic contract vehicles to best leverage our budget, making improvements to Medical/Surgical prime vendor follow-on contracts, and implementing an electronic Procurement system to decrease contracting workload and improve use of “ordering” solutions. We will continue the work we’ve begun with VA-CASE (Center for Applied Systems Engineering) to “lean” and standardize supply chain business processes. (Office of Acquisitions, Logistics, and Construction (OALC))
- **Capital Asset Program.** Acknowledging that we have had issues, VA will adopt best-management practices and controls to lead improvements in the management and execution of our capital asset program. We have developed standardized design prototypes for leased clinical facilities and we will be issuing policy guidance to require the use of these prototypes for all new build-to-suit and prospectus-level leases. Utilizing prototypes will aid in requirements definition, streamline project timelines, and help standardize facilities and service delivery. We are also implementing a deliberate requirements control process, in which major acquisition milestones are identified to review scope and cost changes based on the approved budget and scope. Our new VA Activation Office will help integrate facility activation tasks into the construction process so that facilities are open and available when promised. VA also intends to expand its relationship with the United States Army Corps of Engineers (the Corps) regarding management of future major construction projects. Going forward, VA believes that the Corps should be designated as our construction agent for all new medical facilities with a cost of \$250 million or greater that have not yet started construction. (OALC)
- **Processing of Medical Claims.** As another example, VA is working to improve its processing of medical claims from third party providers to ensure that they are paid quickly and accurately for medical care provided to Veterans. At the same time, we are looking for ways to decrease the cost per transaction for this service. (Office of Management, VHA)



Performance Improvement

Partnering across VA to support improvement efforts, while establishing an enterprise-wide Lean strategy and network that enables a culture of continuous process and outcome improvement

The Performance Improvement (PI) team will partner across VA to support improvement efforts, while establishing an enterprise-wide Lean strategy and network that enables a culture of continuous process and outcome improvement. Performance Improvement supports the Department’s effort to transform VA into a 21st Century organization by achieving a culture infused with daily Lean thinking where employees of all levels embody a Lean and continuous process improvement mindset in all aspects of their jobs. These efforts will allow employees to be empowered to streamline daily processes, leverage solutions across the enterprise, and remove barriers in order to provide excellent customer service to our Veterans and their families. We have set a target of having 10 percent of our employees trained in Lean techniques by the end of 2016.



We have established a national Performance Improvement Office. The national office will be housed within the Office of Policy and Planning (OPP) to serve as the coordinating point for the development and implementation of VA's Lean strategy and Process Improvement efforts. We will set up and facilitate a Performance Improvement Support Council that will bring a cross-organizational perspective to discussions on strategy alignment, sharing of best practices and gauging adoption of Lean across the enterprise. In coordination with the fielding of the two initial Veteran Experience District offices, two district level PI teams will stand up in 2015 with the additional three teams being stood up at the district level in 2016.

Ultimately, PI will foster the creation of a mindset and culture adopted within every level of the organization that centers on eliminating waste, the consistent delivery of value, and the resolution of bottlenecks and constraints that affect the consistent delivery of services and benefits to our Veterans. It places the Veteran in the center of everything we do in order to increase the quality of Veteran service delivery. Employees will feel empowered to streamline daily processes, while managers will be able to escalate challenges to business sponsors to remove barriers and contact peers who may have found a solution to the problem.

Our employees will be able to share "what has worked" enterprise-wide through an easily accessible and continuously evolving knowledge management platform that will serve as repository of best practices, tools, and resources. Employees will be able to coach others on lean performance techniques. We will leverage solutions across Administrations and Staff Offices to promote a seamless Veteran experience.

We have already begun some projects that demonstrate "lean" thinking and employee-driven problem solving.

- **Improved Way-Finding.** The MyVA team met with Veterans and held site visits with employees across the country that highlighted limitations, inconsistencies, and difficulties with existing signs and way-finding materials. The absence of user-friendly, consistent, and accurate navigation materials creates challenges for customers arriving at facilities, parking and finding desired appointment locations. In some situations, Veterans miss appointments because they are unable to find an office. VA has finalized a map review process and has begun to review all VA Medical Center maps. Maps that meet the criteria for being "Gold Standard" will be posted on the internet. Maps that do not meet the review criteria will be improved and posted by December 2016.
- **Guest Wi-Fi Access.** VA is working to expand public internet access across all VHA facilities and clinics. The implementation of Guest Wi-Fi service will enhance connectivity for Veterans and their families and improve the overall patient experience within VA care settings. We have identified and developed actionable Guest Wi-Fi guidelines that facilities can use to introduce and expand coverage to priority areas, while meeting VA security and privacy requirements. This included developing an implementation strategy to support the deployment of a Guest Wi-Fi service across VHA facilities that delivers a standard experience and optimized costs. Funding is needed to fully execute this initiative by December 2016.
- **Integrated Town Halls.** The Secretary has mandated every facility conduct four town halls a year, two of which must be integrated across all three Administrations (VHA, VBA, and NCA). We have developed a guidebook for all VA facilities to help them plan and execute integrated town halls. The guidebook will be distributed to all leaders by September 2015.

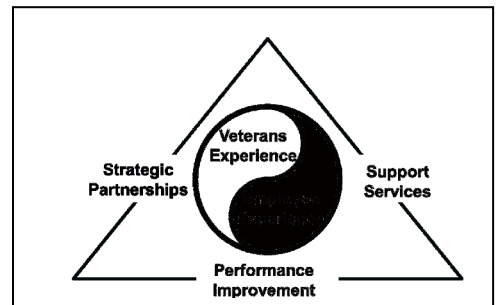
- **Organizational Phonebook.** Based upon their feedback, employees feel limited in their ability to quickly answer Veterans' questions on topics and concerns that fall outside their area of expertise and don't have the tools to identify the correct colleagues who can provide a timely answer. Current online search databases and search tools contain outdated information and offer little to help employees locate the correct VA subject matter expert. We will improve search functionality in online VA databases so employees can search by criteria other than just first and last name.



Strategic Partnerships

Leveraging resources external to VA on an effective and consistent basis, at all levels of the Department, to improve the Veteran experience while enhancing productivity and efficiency across the enterprise

The Strategic Partnerships (SP) priority will enable VA to actively pursue partnerships with pertinent external stakeholders to improve the Veteran and employee experience. This priority seeks to inspire a culture where partnerships are perceived as complementary and beneficial to services and care that VA currently provides to Veterans and their families. The development of training tools and resources will better equip employees to evaluate new partnership opportunities at all levels of the Department. Furthermore, the priority aims to leverage technology to sustain, improve, and replicate best practices across the enterprise. A formalized SP capability will provide structure to how VA proactively engages public and private partners to serve Veterans and their families. With the correct resources, tools, and guidance, VA staff will be empowered to explore, establish, maintain, and evaluate partnerships at the national, district, and local level.



By establishing an SP needs portfolio, offerings from external stakeholders can be appropriately matched to clearly identified needs. Ultimately, the VA will systematically and proactively drive partnerships based on the evolving definition of Veterans' evolving demands. Altogether, the efforts of this priority will result in more and better quality partnerships that will improve the delivery of more holistic and effective services for Veterans, their families, caregivers, survivors, and other beneficiaries.

- **Veteran Economic Communities Initiatives (VECI).** VECI is one of several program-specific initiatives VA is launching to increase local support for Veterans and their families. VECI's goal is to increase the number of education and employment opportunities available to Veterans and their families in their communities. VA's economic Liaisons in each VECI community collaborate with government leaders, businesses, educational institutions, and nonprofit organizations to help build integrated networks of support and resources for Veterans and their families. VECI has launched in 27 communities to date and will reach 50 communities early in 2016. (VBA)
- **Memorial Affairs Legacy Initiative.** By December 2016, VA will develop at least five multimedia lesson plans that leverage the historical resources of our national cemeteries to memorialize Veterans. Additionally, by December 2016, VA seeks to enter into a partnership with another Federal agency to develop joint educational programming collaboratively. (NCA)

- **SP Toolkit for Employees.** In an effort to empower employees to foster meaningful partnerships that will meet existing and emerging Veteran needs, we will release an SP toolkit with relevant training materials and resources. Elements of the toolkit will include: a Memorandum of Agreement template (published April 2015), the VA Directive of Public-Private Partnerships (published June 2015), the SP-101 training management system-based training for employees (expected launch fall 2015), and a step-by-step due diligence guide for vetting potential partners (expected launch winter 2015). Altogether, these resources and documents will build employee knowledge and empower them to engage in strategic partnerships at the local level. (SP)
- **SP Needs Portfolio.** A more integrated partnership system where the needs of the Department are clearly identified will help VA shape partnerships pursuant to meet changing Veteran needs over time. As a first step, the SP team will create the SP Needs Portfolio that will catalog the needs and partnership opportunities across the Department. Once established, the portfolio will be a resource for potential partnership opportunities that can be proactively driven and strategically matched to the appropriate stakeholders. A baseline needs portfolio was established in May 2015. (SP)
- **SP Relational Database.** The database is designed as an internal tool to connect, track, and capture performance metrics on external stakeholder engagements and partnerships across the entire Department. Core elements of the database include basic organizational demographics; past and current activities with VA; due diligence reporting; and tracking of performance measures. The database brings all offices together under one system, thereby raising awareness of activities with both national and community based organizations – philanthropy, private sector, MyVA Communities, government, non-profits, and many others. This approach further strengthens and better informs VA staff from field offices to national headquarters through a universal system where all employees have access to check the status of external stakeholders. The database is expected to soft launch in winter 2015 and full implementation by summer 2016. (SP)

Regionalization as an Enabler for Integration

In terms of implementation, one of our first activities was to set up a Regionalization Task Force to develop recommendations for a single regional framework for the Department (see Figure 7).⁸ The Regionalization Task Force worked with VA Administrations and Staff Offices to develop a plan that they are using to guide their realignments into a five-district model that roughly balances VA facilities and capabilities with the Veteran population and demand projections for 2025.

The intent of moving to five districts is more effective and efficient internal VA operations that, in turn, will result in better service to Veterans. The new district alignment will serve several purposes. First, the districts are based upon state boundaries and will align the disparate organizational boundaries of the Department into a single framework, easing internal coordination, enhancing collaboration between business lines, and enabling standardized measurement of performance. Basing the framework upon state boundaries will also enhance collaboration with external stakeholders. The district framework will set the conditions for the rollout of the Veteran Experience office that will be responsible for facilitating enhanced customer service capabilities across the Department. Finally, the district framework allows for

⁸ VA Press Release: “VA Announces Single Regional Framework under MyVA Initiative,” January 26, 2015

experimentation and piloting of other approaches for improving functional support capabilities. The end goal of this realignment is that our internal operating boundaries will be transparent and irrelevant to Veterans and stakeholders.

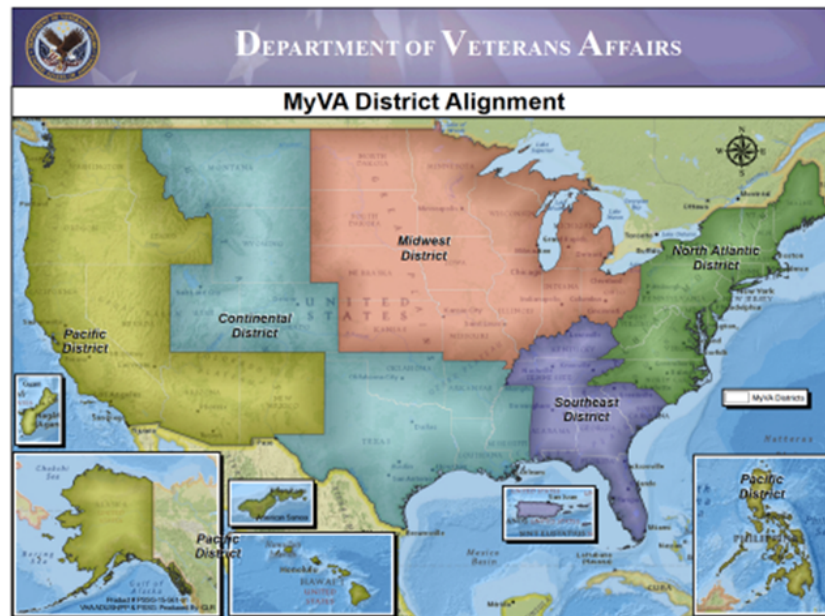


Figure 7. Single Regional Framework

NCA began the realignment of their Memorial Service Networks (MSN) in April 2015 and completed the shift in June 2015. NCA has renamed their MSNs as NCA District Offices to provide consistent nomenclature with other VA organizations operating in the single district model. VBA realigned to VA's single map by establishing a fifth area office in Denver, Colorado, and renaming the area offices as VBA District Offices. Existing VBA consolidated processing offices for the education, insurance, pension, fiduciary, and loan guaranty programs will be integrated into the new five-district construct based on their existing office locations without adding new facilities or head count. VHA is finalizing a phased approach for the realignment of Veteran Integrated Service Networks (VISN) within the state-based boundaries of the district framework. Although the execution planning is not yet complete, it is likely that there will be some consolidation of VISN headquarters, but that each district will still include multiple VISNs. The VISN realignment team is developing a detailed timeline for implementation.

VA staff offices with field components are also aligning to the five district model with most offices completing that realignment by the end of FY 2015.

As mentioned above, one of the reasons for the move to a district model is to support the establishment of the field component of the VE office that will be responsible for facilitating enhanced customer service capabilities across the Department. As the VE office in each District is established, the VE staff will be augmented by additional personnel and, over time, enabled by additional capabilities. As previously mentioned, experts in Lean process improvement will be based within each District Office to provide expertise for process improvement initiatives for VA facilities within the District. The District Veteran Experience Officer will work with facility directors in each District to coordinate and schedule the introduction, piloting, and establishment of each new capability.

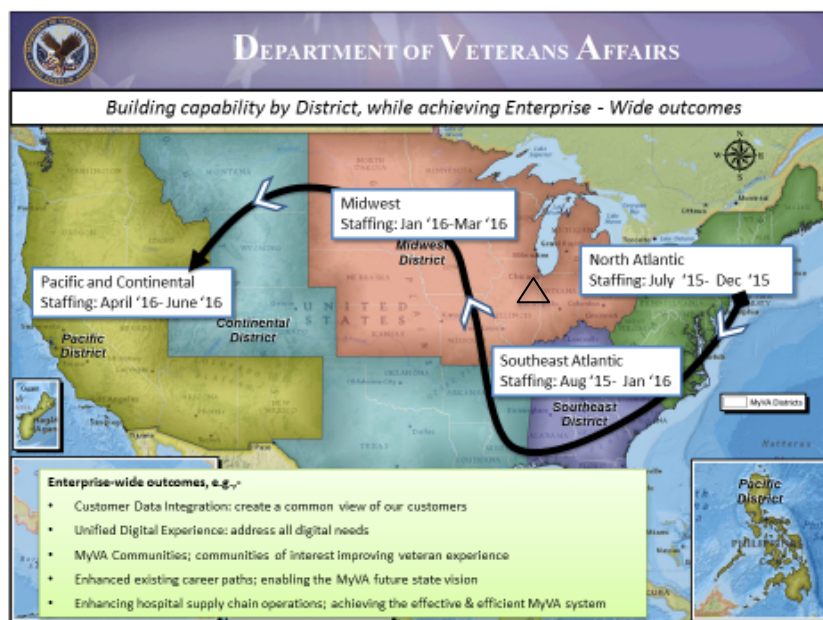


Figure 8. District VEO Deployment Sequence

The district offices will be established in a phased approach, beginning with the North Atlantic and Southeast Districts, and then moving to the Midwest, Continental, and Pacific Districts, in order (see Figure 8). Programs associated with improving the Veteran and employee experiences will be piloted as we build up capability in each district, with lessons learned and best practices cascaded to the subsequent districts. As an example of a pilot program affecting both Veteran and employee experiences, we will pilot an **Organizational Transformation Pilot** in two VISNs in the North Atlantic District beginning in FY 2015. This pilot is anticipated to last 18 months and, if successful and funding is available, will be deployed nationally in FY 2017. (VEO and VHA) This phased approach to the district rollout will allow flexibility, while reducing operational risk.

Horizon 2 Outcome Summary

Horizon 2 is being designed to stimulate and accelerate change across the Department to create a more Veteran-oriented, high performing culture. The list below frames the outcomes we are aspiring for in order to declare Horizon 2 complete and successful. While not every item on this list will be fully complete and transformed by December 2016, we do expect significant progress and will measure ourselves against these outcomes. (Appendix F, furnished separately, contains the timelines for these outcomes).

For Veterans

Previously, VA has had no consistent approach to customer service. That's about to change. We've been studying the best practices of America's top customer service organizations to learn how they excel at delighting customers. They've shared their methods with us, so we can create a holistic frontline customer service program to make access to the care and services Veterans have earned predictable, consistent, and easy.

By the end of 2016, we will have:

- A **single customer facing website** that Veterans can use to do business with VA (initial capability in fall 2015, with additional incremental capability being built through June 2017, when capability is complete).
- A unified **“VA311” enterprise-wide approach** that Veterans can use to easily find information via telephone.
- A way for Veterans to **update or change their authoritative data in one place**, one time, and have that information available and securely shared throughout VA.
- Greater **VBA presence in VHA facilities** to increase benefits access and enhance service.
- **100+ MyVA Communities** established across the nation.
- A more consistent level of customer service in every interaction—enabled by **consistent front-line training** across VA and measured by operational metrics.
- A **VE Office** established at both national and district levels to bring a new lens to how we analyze and design the services we provide to Veterans. VE will not be another layer of management or bureaucracy, but will:
 - Work collaboratively with local facilities in analyzing and designing better customer interactions and the tools that support them;
 - Develop and deliver customer service training curricula and methodologies;
 - Keep a close eye on customer service performance to make sure the right issues are being addressed in the right ways, and;
 - Implement better ways to help Veterans navigating through the range of services within VA.

For Employees

To engage and empower employees, we will have taken the following steps by the end 2016:

- Delivered **VA 101 training** to approximately 50 percent our employees to improve their knowledge and understanding of VA’s history and services offerings;
- Conducted **front line customer service training** pilots in each of our five Districts;
- Expanded **leadership development** programs;
- Vastly improved **employee communications**;
- Completed standardized staffing models, with **vacancies filled for mission critical occupations**;
- Improved and streamlined **recruitment and hiring practices** for VA facilities; and,
- Established better linkage of **organizational and performance measures** to VA Goals and Objectives.

For Citizens and Taxpayers

VA must be a good steward of public resources. Citizens and taxpayers can expect to see new efficiency in how we run our internal operations. While not every item on this list will be fully complete and transformed by December 2016, we do expect significant progress and will measure ourselves against these outcomes.

Support Services Excellence Outcomes

- Governance and framework established to optimize a subset of **support services** and provide better support to front-line managers and employees.
- Vastly improved **hiring; contracting and supply chain practices; and IT service support** across the enterprise.

Performance Improvement Outcomes

- **VCL improvements completed**, enabling focus exclusively on Veterans in crisis.
- Approximately 30,000 VA employees **trained in Lean techniques** (up from 0.28 percent today) and a fully implemented **Knowledge Management System**, enabling more sharing of best practices across the Department.
- **Requirements-based budgeting, programming, and resource allocation process** in place, to include a strategic review of facility and network optimization.

Strategic Partnership Outcomes

- A dynamic **Strategic Partnership Needs Portfolio** to efficiently and effectively triage and leverage external partnership opportunities.
- A **Strategic Partnership relational database** that captures and catalogs engagement activities between VA and external stakeholders at the national, regional, and local level.
- An **external web site** for current and potential strategic partners established.
- An **internal website** that will empower employees to disseminate information, share best practices, and be proactive in engaging with community stakeholders.

Horizon 3: Optimizing and Scaling MyVA

Much of the work depicted in Horizon 2 will not be complete by December 2016. Even those initiatives that are fully successful will require optimizing and full scaling beyond 2016 and into Horizon 3 to make the change “stick” and truly change the way we work across the enterprise. Thus, the MyVA Task Force will also coordinate initial operational planning for the transition of that work beyond 2016. For instance, the Veteran Experience office will not reach full capability until FY 2017, but the Task Force will assist in the planning and stand-up those capabilities through the rest of FY 2015 and FY 2016, including initial pilots in the VA districts, and then support full fielding into FY 2017. Likewise, the Task Force will support the efforts in areas related to improving the employee experience, developing passionate leaders, and developing a high performing culture—all of those efforts will take time to optimize, scale, and to reach full fruition. Similar to the fielding of VEO, the implementation of the support services framework and governance structure will extend through FY 2015 and FY 2016 and into FY 2017. The Task Force will also support that effort until the Support Services organization is capable of operating independently. We also know that the transition to a true Lean culture will take time, but by Horizon 3 it is our intent that VA employees will have embraced lean thinking and practices into their daily functions. Finally, leveraging external partnerships to the benefit of Veterans will continue into Horizon 3. As we move toward and into Horizon 3, the Task Force will be involved in synchronizing and integrating these activities.

Beyond the Horizons: Building a High Performing Organization

The capabilities we describe in the horizons above will create a solid foundation for increasing the effectiveness and value of the services we provide for Veterans. They are necessary, but not sufficient by themselves to make the changes permanent and enable the culture we seek. Therefore, concurrent with and throughout all of the horizons, we'll focus on management reforms creating a high performing organization. We will invest in long-term capabilities that will enable sound strategies based on Veterans' needs, a high-performing culture, passionate leadership, and robust management systems.

Sound Strategies: Development of the 2018-2024 Strategic Plan

In terms of sound strategies, VA's Quadrennial Strategic Planning Process (QSPP) has begun for development of VA's 2018-2024 Strategic Plan. Through this process, working with internal and external stakeholders, we will envision the VA of 2024, and, building upon MyVA accomplishments, develop the next set of goals and objectives. The development of this plan will further the transformation effort. The environmental scans and forecasts will be enhanced by the research on Veterans that the VEO will provide. This research will help inform the discussion and selection of VA goals and objectives. QSPP will also benefit from positive and negative lessons learned during the MyVA transformation. The strategic planning process itself is an opportunity to demonstrate openness and inclusiveness, as it incorporates ideas and forecasts from the front-line employees, as well as headquarters staff.

High Performing Culture and Passionate Leadership

In addition to those activities associated with the priority of improving the employee experience, VA is working to implement structural processes that will reinforce a high-performing culture with passionate leadership. Some of the most significant actions are described below.

- **Performance Management and Cascading of the Strategic Plan Down to Individual Performance Plans.** As previously discussed, the 2014 – 2020 Strategic Plan was not initially deployed and cascaded effectively. A Performance Management framework oriented around Strategic Plan and APGs will help align both operational and individual performance to strategic goals and Veteran outcomes.⁹ VA will emphasize the connection between strategic goals, mission requirements, and operational and individual performance objectives (see Figure 9). The performance management framework also helps each employee understand how he or she contributes to the overall mission and goals of the Department. Managers will be trained to use performance indicators, goals, and awards that are appropriate for the Veteran service environment. This will help them use performance data in the appropriate way—to identify trouble spots and start a conversation about root causes and potential remedies—not as input solely for punishment and reward.

⁹ Office of Management and Budget, Circular A-11.



Figure 9. Performance Management Alignment

- Governance.** As we transition capabilities that are being incubated by MyVA to existing and new organizational structures, we will need to re-examine and update our overall understanding of organizational roles and responsibilities and our governance models. We want roles and responsibilities to encourage cooperation, not silos or duplication of effort. We will re-examine “decision rights” to make sure they appropriately balance the equities of headquarters and field. An updated governance model will help us understand which decisions are made at which level, who has oversight, and what the escalation path is when an impasse is reached at a lower level or a decision needs to be appealed. It will also help all of us understand how decisions will be enforced. Developing and instituting sound governance processes will demonstrate accountability and transparency and help to create a culture of trust.
- The Office of Accountability Review.** The Office of Accountability (OAR) review was established in 2014 and sets VA-wide policies, practices, and procedures related to administrative investigations of senior managers. The office also carries out those administrative investigations in order to help recalibrate leader accountability and improve VA culture regarding whistle-blower retaliation and other supervisory conduct impacting employee morale and public trust in VA. OAR leads the development of processes and procedures for enterprise-level tracking of employee discipline and for identification and analysis of trends and risks visible in internal and external oversight referrals and responses. The Office of General Counsel defends the accountability actions within the expedited appeals process to ensure the actions taken against senior officials are upheld by the Merit Systems Protection Board. OAR needs to be integrated into the routine governance functions of the Department it is seen and used a teaching tool to support leader development and support a high-performing culture.

Robust Management Systems

The Department must improve its management systems and is taking steps to do so. Some of the most significant efforts are described below, to include the priority of moving to a true requirements-driven, multi-year resource allocation process.

- **Managing for Results (MFR).** VA has adopted a requirements-based planning, programming, and budgeting process known MFR. This allows us to connect our forecasting of Veteran needs to our strategy, resource plans, and budgets. By the time we develop the FY 2018 budget submission, VA's mission and resource requirements will be fully based on performance standards and cross-functional integration in order to have a defensible budget and optimize our services to all Veterans.
- **Facility Optimization via Strategic Capital Investment Program.** As a complementary effort to MFR, VA will use the Strategic Capital Investment Planning (SCIP) process to develop a long-term strategy that accurately identifies both our facility requirements and opportunities to divest excess capacity. This facility optimization strategy must take into account forecasted demand for services, current and future operational capacity, and potential opportunities to partner with other agencies and organizations that may provide services to Veterans. This analysis and recommendations for long-term implementation will be complete by the end of FY 2016, with implementation beginning in 2017 and beyond.
- **Enhanced Enterprise Integration and Innovation.** VA will combine existing capabilities to establish an office whose purpose will be to facilitate integration across the enterprise. This office will formulate a Department business strategy that drives the planning and development of business requirements (new and existing) that impact more than one VA organization. We will use this strategy to work with stakeholders to generate enterprise business requirements, enterprise business rules, and enterprise business approaches. The office will then support effective alignment of management and improvement activities, establish strategic mission and performance standards, and ensure there are means to manage common data as a Departmental enterprise asset. This organization will manage the Department's innovation program and lead the Department's predictive analysis efforts.
- **Enterprise Risk Management (ERM).** VA will implement ERM as an element of strategic planning, and as a framework for assessing risks from strategic, operations, compliance, and reporting perspectives. ERM will allow us to make better decisions and help put the right focus on our mission. In cases where mitigation strategies are not in place or are insufficient to reduce the risk below VA Leadership's risk appetite, additional mitigation strategies and required resources will be identified for further discussion with VA leadership. Those risks that still exceed VA's risk appetite will be reported to VA Leadership for continued progress and monitoring to determine if additional actions can be implemented. From an operational perspective, each Administration and Staff Office will develop their risk register to align with the implementation of the Strategic Plan and update this plan periodically to feed any new and emerging risks into the reporting structure. Additionally, any compliance issues that have the potential to have an enterprise impact will be included within this risk register as well.
- **Legislative Proposals to Enhance Management Initiatives.** Institutionalizing the MyVA transformation will also include pursuing various legislative proposals including:

- *Establish Veteran Experience office via FY 2017 Budgeting Process.* This will give the office permanent status and establish its place within the Department. It will also assist the Department to budget for research and programs directed at the Veteran population as a whole, which will foster integration of benefits and services.
- *Establish Support Services Organization.* This will allow the Department to centralize, as appropriate, authority for support services budgeting and operations. The result will be improved efficiencies, as the Department will be able to take advantage of economies of scale. It will also allow the Department to better estimate the true costs of services—both back office and benefits delivery to Veterans and beneficiaries.
- *Reconfigure existing staff office functions into Office of Enterprise Integration (OEI) via FY 2017 Budgeting Process.* This measure will provide an institutional home for some of the capabilities developed by the MyVA Task Force. It will establish an office that will serve the strategic needs of the Department by facilitating the development of enterprise business requirements, enterprise business rules, and enterprise business approaches.
- *Appeals.* VA is currently examining process improvements and investigating legislative proposals that would allow us to develop a more efficient, effective, transparent, and timely appeals process.

Advisory Groups

MyVA Advisory Committee

The establishment of a MyVA Advisory Committee (MVAC) under the guidelines of the Federal Advisory Committee Act (FACA) is a major enabler for MyVA. The MVAC serves as a sounding board for the Secretary and provides an external perspective on Department challenges. It reviews our plans and advises us on rebuilding trust with Veterans and other stakeholders, improving service delivery with a focus on Veteran outcomes, and setting the course for longer-term excellence and reform of VA. MVAC membership represents Veterans, medical professionals, educators, customer service experts, experience transformation leaders, leading technologists, and Veteran advocates (see Figure 10).

	Organization	Title
Josue Robles (Chair)	USAA	President and Chief Executive Officer (retired)
Michael Haynie, PhD (Vice Chair)	Syracuse University	Vice Chancellor Founding Executive Director, Syracuse University Institute for Veterans & Military Families
Herman Bulls	Jones Lang LaSalle Bulls Advisory Group, LLC	International Director and Founder Founder
Teresa Carlson	Amazon Web Services	Vice President Worldwide Public Sector
Richard H. Carmona, M.D., M.P.H., FACS	Canyon Ranch	Vice Chairman; Former Surgeon General
Delos M. Cosgrove M.D.	Cleveland Clinic	President and Chief Executive Officer
Laura Herrera, MD	John Hopkins Healthcare Center	Medical Director for Population Health and Community Health Programs
Chris Howard, PhD	Hampden-Sydney College	President
Nancy Killefer		McKinsey & Company Senior Partner (Emeritus); formerly Treasury, IRS
Fred Lee		"Nationally recognized expert and consultant in patient relations and service excellence"
Eleanor "Connie" Mariano	Center for Executive Medicine	Founder
Regina "Jean" Quinn Reaves		Veteran and Veteran Advocate
Lourdes Tiglao	The District Communications Group Regional Communications Manager for Region III, Team Rubicon	Director of Outreach and Resource Development
Robert Wallace	VFW Washington Office	Assistant Adjutant General and Executive Director

Figure 10. MyVA Advisory Committee Members

MVAC will also advise on competing short and long-term plans and strategies and offer information and recommendations on appropriate levels of support and funding for Department plans and strategies, helping the MyVA Executive Director and Secretary to balance competing priorities.¹⁰

Special Medical Advisory Group

The Special Medical Advisory Group (SMAG) is a federally chartered advisory committee that, by statute, advises SECVA, through the Under Secretary for Health, on matters related to health care delivery, research, education, training of health care staff, and planning on shared care issues facing VA and DoD. In 2015, SECVA reconstituted the SMAG naming Jonathan Perlin, MD as the chairman and refreshing the group's membership. The newly reconstituted 11-member SMAG, composed of leading medical experts to assist the Department in delivering health care to the nine million Veterans enrolled in the Veterans Health Administration, held its inaugural meeting on May 13, 2015 in Washington, DC. SMAG plans to meet again in the fall to develop specific, measurable, achievable, relevant, time-defined recommendations aligned with the VA Strategic Plan and the VHA Blueprint for Excellence. SMAG will explore areas of collaboration and synergy between the MyVA advisory committee and SMAG.

Risks

No transformation effort is without risk. The current risks we see for MyVA are discussed below, along with our assessment of severity and the steps we are taking to mitigate them.

There is **moderate-high risk** that stakeholders will not accept the MyVA initiative as a viable solution for correcting VA's perceived shortfalls. Many stakeholders do not yet understand what MyVA is at a programmatic level and what it is trying to achieve. Without a clear view of the policies and objectives MyVA is proposing we cannot assume that our stakeholders feel that MyVA will "fix" VA. Also, there will always be claims that efforts such as this will only survive as long as the current political appointees are in office. To mitigate these risks, VA will need to develop clear communication products that provide clear insight to MyVA's programs, goals, and accomplishments; demonstrate that the projected plan extends past the time limit of the current administration and that transition plans will be in place; and that the initiatives will be funded over the long-term.

There is **moderate-high risk** that stakeholders will question whether or not we should be spending the money on this transformative effort. This plan is being introduced during a time of increased budget scrutiny. To mitigate this risk, VA will have to: demonstrate the return on investment for the various initiatives; ensure to the extent possible that the milestones and efforts detailed in the plan are achievable under the proposed timelines; and explain how the MFR process will ensure VA's ability to accurately forecast budget requirements for MyVA's mission and resource needs.

There is a **high** risk that MyVA initiatives will not be completed on time due to personnel resource constraints resulting from challenges in the hiring process. Challenges in hiring have already affected MyVA, and compensating through creating "detail" assignments has created

¹⁰ Charter of the MyVA Advisory Committee, U.S. Department of Veterans Affairs, February 9, 2015.

cascading problems for organizations supporting those detail assignments. To mitigate this risk, VA will need to expedite hiring and/or create more flexible resource “pools.”

There is a **moderate risk** that MyVA progress will be limited due to funding challenges. Some of the MyVA Task Force funding is to develop pilots and proposals. In order for these pilots to be implemented throughout the Department, Administrations and Staff Offices will need to identify funding for the long-term. To mitigate this risk, VA leaders will have to prioritize MyVA efforts and ensure requirements are identified for implementation via the MFR process.

There is a **moderate-high risk** that MyVA progress will be limited due to finite leadership capacity. Each priority effort will require executive sponsorship and dedicated leadership to ensure the required level of focus, rigor, resourcing, and support is maintained. This will require time, attention, and mindshare dedicated by the most senior leaders of the Department, all of whom also maintain significant day-to-day operational responsibilities. To mitigate this risk, VA leaders will have to constantly prioritize efforts, focusing on the “critical path” and highest impact activities; while at the same time looking to curtail or postpone efforts and activities that are not as mission critical.

Welcome to MyVA

At its best, VA is a powerful, nationwide expression of caring—the concerted energy of more than 330,000 employees, and countless volunteers and contractors, joined together in service of America’s Veterans. MyVA will promote an environment in which all VA employees see themselves as members of one team. It will be one of continuous learning, facilitated by risk-taking and balanced by personal integrity and constructive, sustainable accountability.

We will fuel employee momentum, by significantly improving how we hire, buy goods and services, and build IT products. Processes will be thoughtfully reconceived and improved using Veteran-centered design. And, since VA does not—and cannot—do everything that Veterans need or want we will partner with communities and the private sector to extend the reach of services available to Veterans and their families.

Our transformation will take time. If done properly, it will build a high-performing organization that continually changes and improves. The benefits of this will be profound and evident in every task an employee undertakes. But the reason for all of it circles back to one clear and simple mission: serving Veterans.

If we do our jobs well, Veterans won’t think much about what we’ve done or how we’ve done it. They will just know they’re receiving some of the best health care anywhere in the world. They’ll know it didn’t take too long to apply for and receive their deserved benefits. They’ll enjoy the home we helped them to finance. Their lives will be richer because of educational opportunities and community connections VA helped to create. And their families will know they’ve been given the utmost respect and final honors when laid to rest.

Appendix A – VA Assessment via High Performance Organizational Model

HIGH PERFORMANCE ORGANIZATION MODEL DIAGNOSIS

Purpose, Values & Principles – Mission is a high calling. Values are outstanding, process for developing I CARE was superb. Behavior inconsistent with Mission and Values suggest it was not effectively deployed or inculcated.

Technical Competence – Training, leader development, and succession planning are not a strategic priority. Crisis has eroded training (i.e. scheduling). Large need for staffing, but recruiting not a leadership priority. Enrolling and onboarding difficult.

Passionate Leadership – Leadership disconnected from employees. Employees not engaged or energized. Excellent Strategy development process and outcome. Hierarchical leadership and entourage “protect” leaders from employees. Communication top to bottom, side to side weak (e.g. Congress, media). Leadership loosely connected (e.g. Administration silos). Middle management complex (e.g. seven geographic maps) and a barrier (e.g. job protection). Absence of accountability and ownership.

Sound Strategies – Excellent Strategies developed using a sound process, but not deployed effectively. Employees can’t tie their work back to the Mission. Employees feel disconnected from Strategies. Unions feel disenfranchised. Budget not linked to Strategy or outcome measurement.

Robust Systems – Systems are a significant issue: scheduling, access, claims, appeals, medical records with DOD. Progress made but always playing catch up. IT systems designed and installed but little regard to improving productivity or redeploying people. Pockets of Lean Six Sigma expertise but not connected or applied enterprise-wide. Procurement system, human resource system, leasing system all broken. No clear readiness indicators. Human resource system does not find or quickly secure talent.

High Performing Culture – The antithesis of High Performing Culture. Specials pins worn by those next to the Secretary. Much formality and hierarchy (e.g. last names, stand when enter, name plates, Protocol escorts, traveling entourages, lack of town hall execution, lack of management meetings with union leadership, stilted communication, etc.) The result is a rule-based culture, especially in VBA. Continuous overtime to solve issues, which is unsustainable. Decentralized mindset evolves scale and Veteran-centered outcomes. No sense of productivity or cost savings despite huge budget need.



VA



U.S. Department
of Veterans Affairs

Appendix B – MyVA Task Force: Decision Memorandum and Initial Operating Charter

Department of Veterans Affairs

Memorandum

Date: December 10, 2014

From: Chief of Staff (00A)

Subj: Establishment of MyVA Task Force (VAIQ 7557059)

To: Under Secretaries, Assistant Secretaries, and Other Key Officials

1. Per the decision at the Senior Leader Off-Site on November 20, 2014, this memorandum officially establishes the MyVA Task Force under the leadership of Bob Snyder as the Executive Director, and Scott Blackburn as the Director, effective immediately. The MyVA Task Force will provide analysis of alternatives and recommendations for reorganizing specified VA structures and processes, while providing initial planning and capability building for select functions and offices, with the ultimate goal to orient all VA operations to the needs and expectations of our Veterans and beneficiaries.
2. The MyVA Task Force is intended to be flexible to address challenges and opportunities as they emerge, but the initial priorities for the Task Force are outlined in the attached charter.
3. The MyVA Task Force will consist of a core program management office with a limited number of full time assigned personnel, augmented by full time and part time details from the VA Administrations and Staff Offices. Those details will include representatives from VA's field offices and operations to ensure plans are effective and executable. This core team may also be supported by full time and part time consultants that provide private sector perspective and expertise. The MyVA effort is a VA priority and will be resourced accordingly.
4. The life span of the MyVA Task Force will be mission and outcome based. The attached charter will be reviewed and updated as often as required, but will be explicitly terminated or renewed no later than two years from the date of this memorandum.


Jose D. Riojas

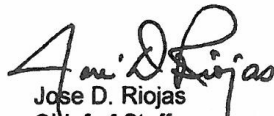
MyVA Task Force
Initial Operating Charter
December 10, 2014

1. **Purpose.** The MyVA Task Force is established at the direction of the Secretary of Veterans Affairs and per the Executive Decision Memorandum (EDM) signed by the VA Chief of Staff on December 10, 2014. The MyVA Task Force will provide analysis of alternatives and recommendations for reorganizing specified VA structures and processes, while providing initial planning and capability building for select functions and offices with the ultimate goal to orient all VA operations to the needs and expectations of our Veterans and beneficiaries.
2. **Concept of Operations.** The MyVA Task Force will consist of a core program management office with a limited number of full-time assigned personnel, augmented by full-time and part-time details from the VA Administrations and Staff Offices. Those details will include representatives from VA's field offices and operations to ensure that plans are effective and executable. This core team may also be supported by full-time and part-time consultants that provide private-sector perspective and expertise.
3. **Resources.** The MyVA effort is a VA priority and will be resourced accordingly.
4. **Initial Tasks.** The MyVA Task Force is intended to be flexible to address challenges and opportunities as they emerge. The tasks that senior leadership assigns to the MyVA Task Force may vary, but the initial priorities include:
 - a. **Task 1.0:** The MyVA Task Force will conduct initial planning and capability building to establish a **VA-wide customer service organization**. The MyVA Task Force will initially include a planning team that will transition to the control of the Chief Veteran Experience Officer once he/she is hired and is ready to assume responsibilities for this function.¹ Thereafter, the Task Force will coordinate with the Chief Veteran Experience Officer to complete the design and implementation of the organization, including tasks 1.1 and 1.2 below.
 - i. **Task 1.1:** The MyVA Task Force will develop a recommendation for a **single regional framework** that will simplify VA's multiple organizational constructs, while deploying the customer service model on a regional basis. The MyVA Task Force will then coordinate with the Chief Veteran Experience Officer, the Administrations, and the Staff Offices to support the transition to that single framework across VA.
 - ii. **Task 1.2:** The MyVA Task Force will develop options for, and pilot the establishment of, a national network of Community Veteran Advisory Councils

¹ The name for the customer service organization, as well as the title for the person who will lead it, will be finalized once the exact functions of the organization are determined.

to promote and coordinate better service delivery with local, state, and community partners.

- b. Task 2.0: The MyVA Task Force will coordinate analysis and recommendations, and build initial capability, for VA to realign its internal business processes into a **shared services model(s)** in which organizations across VA leverage the support services in a standardized manner. Once a decision is made as to where permanent responsibility for this function will reside, the MyVA Task Force will transition those capabilities to that entity.
 - c. Task 3.0: The MyVA Task Force will oversee the identification and execution of **process improvements** identified by employees to improve delivery of services and enhance productivity and efficiency. As an implied task, this effort will be coordinated with and integrated into the Department's overall Lean Management Strategy.
 - d. Task 4.0: The MyVA Task Force, in coordination with the Senior Advisor for Strategic Engagement, will support the development of a strategy to enhance **strategic partnerships** with private sector and other external organizations to improve services to Veterans.
5. Termination. The life span of the MyVA Task Force will be mission and outcome based. This charter will be reviewed and updated as often as required, but will be explicitly terminated or renewed no later than 2 years from the signature date of the EDM establishing the Task Force.


Jose D. Riojas
Chief of Staff


Robert D. Snyder
Executive Director
MyVA Task Force

Appendix C – MyVA Task Force Operations

The MyVA Task Force is supplemented by full-time and part-time details from VA Administrations and Staff Offices. This allows the Task Force to extend its reach into VA organizations. Personnel detailed to the program management office bring expertise from headquarters and field locations, ensuring that the program office understands the feasibility of plans and designs. As personnel leave the program office, they will help pollenate information and ideas to their home organizations. Detailed personnel are supplemented by Liaison Officers for VHA, VBA, NCA, and each of our five union partners.

Fusion Cell

Veterans and VA employees have many ideas for improvement in Department processes and operations. The MyVA Task Force has established a “Fusion Cell” that will provide a process and mechanism to document, prioritize, align, recommend, and track ideas and other input from Veterans, VA employees, and other sources. The intent of the Fusion Cell is to enable VA and the MyVA Task Force to acquire recommendations and ideas from various sources and provide a mechanism to capture, store, process, present, and disseminate information for the life-cycle of each idea. By doing so, the Fusion Cell helps facilitate collaboration with Veterans and VA employees, as well as transparency with all MyVA stakeholders. When new ideas and recommendations are received, the Fusion Cell processes the data to make it accessible and useable; screens, analyzes and triages the data; and identifies gaps and redundancies. The Fusion Cell then screens all recommendations for new initiatives against the following criteria:

- Potential positive impact on the Veteran or Employee experience
- Feasibility of implementation
- Alignment with MyVA priority objectives and needs

They are then allocated to the most effective solution mechanism (or mechanisms) to address issues that are the most time sensitive, or have the biggest potential return on investment. The Fusion Cell tracks and reports progress and metrics for all initiatives transferred to a MyVA priority, administration, or staff office for implementation.

Communications

The objectives of the MyVA Communication Team are to:

- Introduce and broadly communicate MyVA as a transformation effort to modernize VA’s culture, processes, and capabilities in order to put the needs, expectations, and interests of Veterans and beneficiaries first.
- Confirm to employees their critical role in assuring MyVA’s success and communicate leadership’s intent to incorporate their ideas and concerns into MyVA solutions.

To the extent possible, the communication strategy will leverage the Department’s ongoing efforts to improve its internal communication capabilities with existing VA channels and resources to distribute MyVA messages. These resources include, but are not limited to:

- Internet and intranet
- Employee channels, such as town halls, webinars, and video broadcasts
- Congressional and media outreach resources
- Staff experts in communications, branding, and media relations
- Social Media

Appendix D – Horizon 1 Initiative Descriptions

The emphasis for Horizon 1 is on leveraging existing programs and initiatives that improve our relationships with Veterans. There are many initiatives focused on the delivery of superior benefits and services that are already resourced and being taken by organizations throughout VA. Some of those transformational initiatives include:

- **Implementation of VHA Blueprint for Excellence.** The Blueprint for Excellence is the detailed vision for the evolution of health care services provided by VA. To realize this vision by 2020, VHA must make significant progress in each of the 10 strategies outlined in the Blueprint by December 2016. Actions in the Blueprint include some that were recommended in a health care modernization study commissioned by the Office of Management and Budget. As an example, VHA will expand virtual medical modalities to enhance high-performance, Veteran-centered care. Other transformational actions in the Blueprint will improve the organization and services in accordance with the Veterans Access, Choice and Accountability Act of 2014. For example, as a result of the Choice Act, VHA has commissioned a 12-part comprehensive evaluation of VHA health care that will be delivered to Congress and a newly chartered Commission on Care, which will make further recommendations to the Secretary and the President. (VHA)
- **Access Improvement Initiative.** In the past year, we've completed 7 million more appointments for care inside VA and in the community than in the previous twelve months. 97 percent of our appointments are completed within 30 days and we've shrunk the electronic wait list by 55 percent. Meanwhile, we've hired over 1,000 doctors and over 2,700 nurses. VA will continue its focus on timeliness for outpatient care appointments. With timely access to outpatient care, Veterans will experience higher quality health care outcomes and higher patient and employee satisfaction. The initiative will continue its multi-pronged approach to address this issue. The efforts include enhancements to VA's scheduling software, updates to scheduling and consult policies, improving standard procedures, and increasing data tracking and analytics. The results will be measured by improvements in outpatient wait times, size of the Electronic Wait List, no shows and cancellations, and overall Veteran satisfaction. VA will also use closer-to-real time feedback tools for Veterans, such as VetLink and Interactive Customer Evaluation, to communicate about the experiences with access and other issues. (VHA)
- **Whole Health Care.** This transformation will result in higher patient and employee satisfaction, increased patient engagement and activation, improved health outcomes, and decreased cost. VA will deploy this program into the field through specialized consult services, engagement sessions, toolkits, and workshops for VHA leadership, staff, clinicians, and Veterans. A comprehensive and highly experiential Whole Health education program for staff, clinical professionals, Veterans, and families will engage all stakeholders in implementing this change in approach, mindset, and solutions. These tools will be available in-person and online. Results will be measured through effectiveness/impact studies. (VHA)
- **Chronic Integrative Health Management.** The Integrative Health Coordinating Center (IHCC) is leading the effort to identify, standardize, and operationalize integrated health therapies for all eligible Veterans. This includes employee and Veteran-facing activities as well as research activities for evidence-based solutions. The results will be measured by availability and utilization of chronic integrative health services and improved chronic

disease management (e.g. improved chronic pain management, increased functional status, and decreased opioid utilization). (VHA)

- **Mental Health.** As previously mentioned, VA has begun a measurement-based approach to mental health care and mental health care management. Dashboards are created that allow leaders and managers at all levels of the organization to view the same information about Veteran and employee satisfaction and key measures of process, resource, and demand. Beginning in calendar year 2016, Veteran self-reported outcome data will be added. By December 2016, it will be common for Veterans receiving mental health care to review their progress over time with their providers on key measures, while managers at all levels in the organization are tracking key management variables and addressing problem areas in real time. (VHA)
- **Vista 4.** By December 2016, VA will achieve the NDAA requirements for interoperability of electronic health records in partnership with DoD. VA will provide seamless access to Veterans' complete health history with records from DoD, all VA facilities, and available third party information integrated at the point of care. Veterans will have a personalized care plan which any VA provider can see, at any facility, to ensure continuity of care consistent with Veterans' goals and preferences. Veterans will also be able to refill VA prescriptions when they are away from home, without making an appointment at a local VA facility. VA is also making improvements to our scheduling system, including a simplified view of Veterans' needed appointments, and a graphical calendar display of available times and providers. This will allow schedulers to work more efficiently and provide better tools to manage access to care.

Additionally, by September 2018, VA will have fully developed and deployed Vista 4. Vista 4 will have the technical capability to bring evidence-based medicine to the point of care and to provide functionality for multiple care venues. By emphasizing patient-centered care plans, Vista 4 will significantly improve Veteran health outcomes and care coordination. Moreover, with an interoperable EHR, each Veteran will have a single, approved longitudinal care plan that is coordinated and comprehensive. (VHA)

- **Welcome to VA.** In April 2014, the VA Health Resource Center began a pilot outreach program, Welcome to VA (W2VA), to provide Veterans enrolled by VA's Health Eligibility Center a personal introduction to VA health care services, programs and resources. To help Veterans become more familiar with VA's health care services, VA currently sends each new enrollee an introductory letter and personalized handbook in the mail. W2VA enhances this preliminary communication by reaching out to newly enrolled Veterans through personal phone calls upon enrollment, providing assistance with health care inquiries, and assisting with their initial appointment at their preferred VA health care facility. Since April 2014, W2VA has personally welcomed more than 45,000 newly enrolled Veterans to the VA healthcare system and provided assistance with VA healthcare inquiries. With over 4,500 responses, the program has received a 4.9 out of 5 rating for Veteran satisfaction. Due to the success of the program and its benefits to newly-enrolled Veterans, the W2VA program has been approved by VA to expand beyond the pilot stage by reaching out to all newly-enrolled Veterans. As a result, the program was fully implemented July 1, 2015. (VHA)
- **Leveraging VHA Vet Centers.** VA will increase readjustment counseling services to eligible Veterans, Service members, and their families through improved oversight and targeted improvement in lower performing Vet Center teams. The Office of Readjustment

Counseling established targets for readjustment counseling visits in each District Manager's performance plan in March 2015. Bi-weekly reports and specific improvement plans will be utilized to measure outcomes and effectiveness. (VHA)

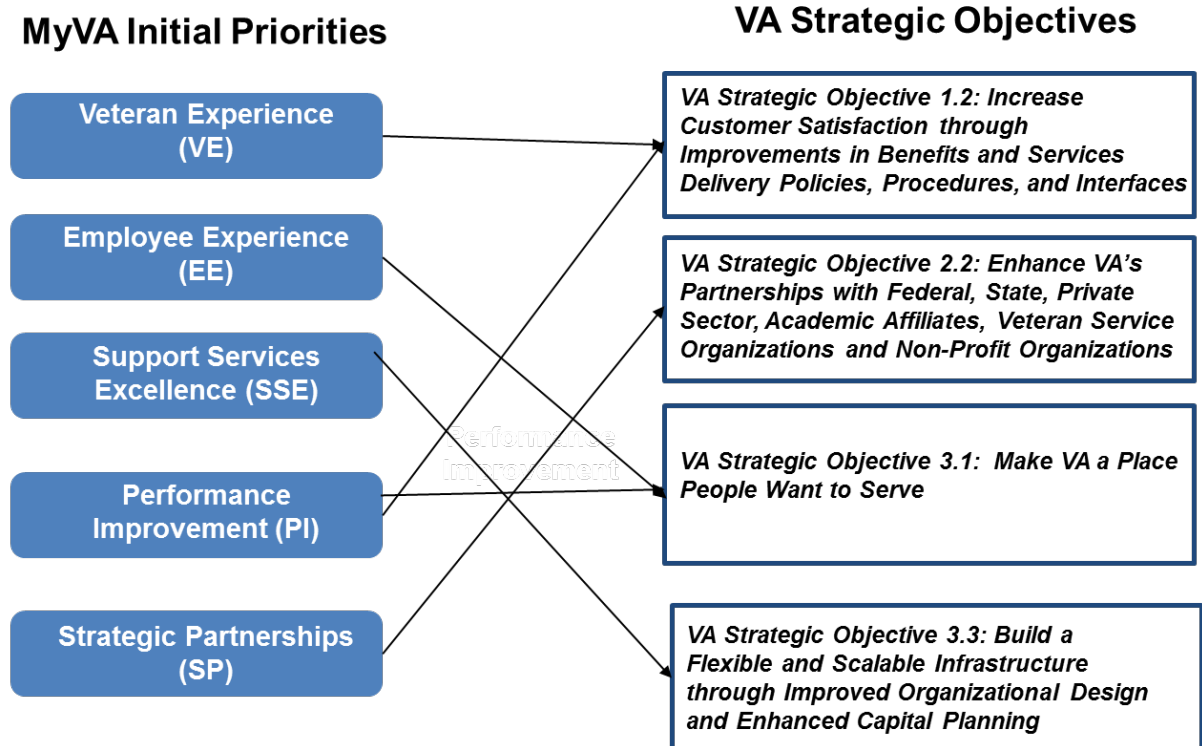
- **Increasing Memorial Affairs Access.** To increase Veteran access to burial needs, we are currently undertaking the largest expansion since the Civil War, with plans to establish 18 new cemeteries by the end of 2020. Of these 18, by December 2016, VA will open three new national and five new State and Tribal Veteran cemeteries providing reasonable access to a burial option to an estimated additional 400,000 Veterans. (NCA)
- **Employment.** VA will continue facilitating innovative employment opportunities for Veterans. One of the primary ways VA accomplishes this is through the Veteran Employment Center (VEC), available at www.ebenefits.va.gov/jobs. The VEC serves as the Federal Government's authoritative source for connecting transitioning Service members, Veterans, and their families to employers who are committed to hiring them. Currently, the VEC lists more than 2.2 million public- and private-sector jobs and employers have committed more than 620,000 positions to hire. VA is also creating new pathways to training and employment through innovative strategic partnerships. For example, VA has formed partnerships with organizations like Corporate America Supports You, which provides free work support services and job placement to Wounded Warriors and military families, and The Mission Continues, which empowers Veterans to give back to their communities while helping them develop marketable skills along the way. VA has also formed partnerships with companies like Hilton Worldwide, Qualtek Telecommunications, Warriors4Wireless, and others to train, certify, and hire Veterans exclusively. In addition to managing the VEC and forming strategic public-private partnerships, VA is also launching two new no-cost educational programs this summer—Accelerated Learning Programs and VA Learning Hubs—to help transitioning Service members and Veterans develop skills and credentials that lead to meaningful employment. (VBA)
- **Increasing Access to VA Benefits and Services.** VA is working to expand and integrate access to all services and benefits, including having a Veterans Benefits Administration (VBA) presence in all VA Medical Centers. As a first step toward achieving this goal, VA is implementing **Tele Benefits, also known as Click to Benefits**. Veterans will gain more access points to VA benefit representatives by leveraging existing video conferencing (VTC) capability and infrastructure used in VHA's Telehealth initiative. This program will save Veterans travel time and costs, as well as provide improved responsiveness and access through on-the-spot claims assistance. There is also potential to expand this program to other locations outside of VA in the communities where Veterans live and work. The program's effectiveness will be measured by increased contacts made with the rural Veteran population. (VBA)
- **Memorial Affairs Legacy Initiative.** By December 2016, VA will develop new educational programming (at least five multimedia lesson plans) that leverage the historical resources of our national cemeteries to memorialize Veterans. Additionally, by December 2016, VA seeks to enter into a partnership with another federal agency to develop joint educational programming collaboratively. (NCA)
- **National Work Queue (NWQ).** NWQ is a paperless workload management initiative designed to improve VBA's productive capacity and claims processing workflow. Veterans will receive more timely and accurate service regardless of their geographic

location. Regional Offices (RO) will receive daily electronic work assignments that meet national claims processing priorities. NWQ will deploy both a standardized deferral process and a quality diagnostic tool that will provide immediate feedback to employees and help improve processing times and Veteran outcomes. During Phase 1 of implementation, beginning in October 2015, NWQ will centrally manage and distribute rating claims workload from VBA Central Office to the RO level based on an established station-by-station capacity model. Phase 2, scheduled for implementation in 2016, will enhance VBA's capability to centrally manage and distribute all non-rating claims and appeals. Proposed measures include time in queue, avoidable deferral rate, quality, claim completions, and claims processing efficiency based on productive capacity. (VBA)

- **Improving Appeals Experience.** Veterans will see an increase in the transparency and overall ease of experience with the appeals process. This includes being able to access an accurate status of their appeals on eBenefits by the fall of 2015. The Board of Veterans Appeals (BVA) is also beginning to digitize its appeals handling to increase the efficiency that Veterans' appeals are processed and improve efficiency and consistency. (BVA)
- **Maximization of Appeals Board Hearing Dockets for Veterans.** VA is taking steps to increase Veteran awareness of the impact of electing an appeals board hearing and increase use of available hearing dockets. BVA is engaging internal and external stakeholders, including VBA and VSOs to: verify the validity of pending hearing requests and increase communication with Veterans to ensure that Veterans appear for hearings and are aware of the impact of electing a hearing. BVA is also revamping hearing scheduling to prioritize BVA resources to best address pressing needs. Measures of success will include: increased hearing utilization rates and J.D. Powers' Customer Satisfaction Survey results. (BVA, VBA)
- **Ending Veteran Homelessness.** VA remains committed to ending and preventing Veteran homelessness, which means there are no Veterans sleeping on our streets. VA's approach to ending Veteran homelessness is to emphasize rescue for Veterans who are homeless today, sustainment, support and treatment for formerly homeless Veterans who enter permanent housing to ensure that they are able to maintain it, and prevention for Veterans at risk of homelessness. The ultimate goal is that all Veterans have permanent, sustainable housing with access to high-quality health care and other supportive services. Since the launch of *Opening Doors: the Federal Strategic Plan to Homelessness* in 2010, there has been tremendous progress. The number of Veterans experiencing homelessness has declined significantly. Since 2010, nearly 230,000 Veterans and their family members have been permanently housed, rapidly rehoused, or prevented from falling into homelessness through the intervention of VA and its Federal and community partners.

Going forward, the focus is threefold: 1) conducting coordinated outreach to proactively seek out Veterans in need of assistance; 2) connecting homeless and at-risk Veterans with [housing solutions](#), [health care](#), [community employment services](#), and other required supports; 3) collaborating with Federal, state, and local agencies; employers; housing providers; faith-based and community nonprofits; and others to expand employment and affordable housing options for Veterans exiting homelessness. Veterans who are homeless or at imminent risk of becoming homeless can call or visit a [local VA Medical Center](#), where homeless coordinators are ready to help. Veterans and their families may also call 1-877-4AID-VET (1-877-424-3838) to access VA services. [va.gov/homeless](#) provides more information about [VA programs](#) for Veterans who are homeless.

Appendix E– MyVA Initial Priorities Mapped to VA Strategic Goals



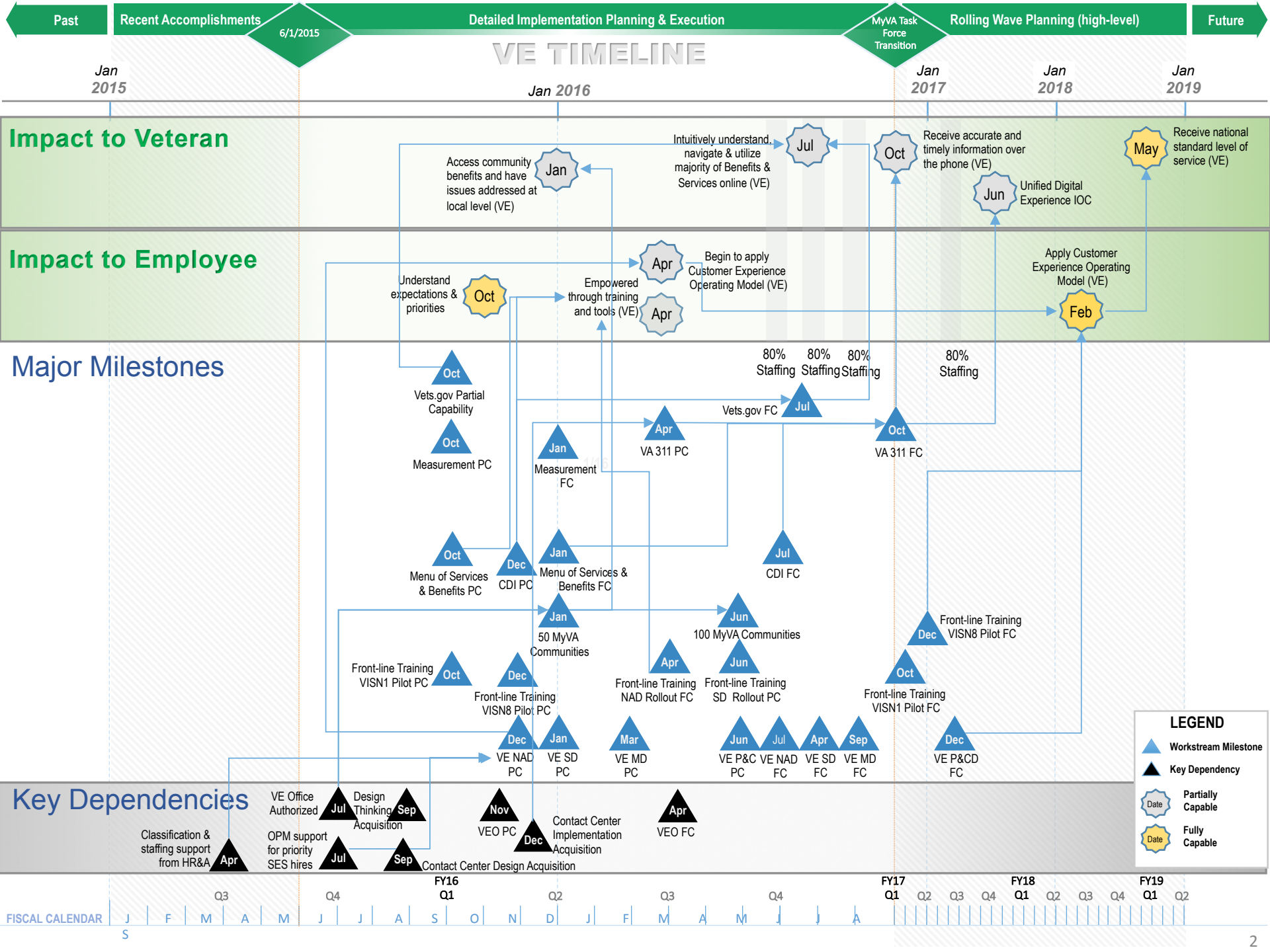
Appendix F - Capability Timelines

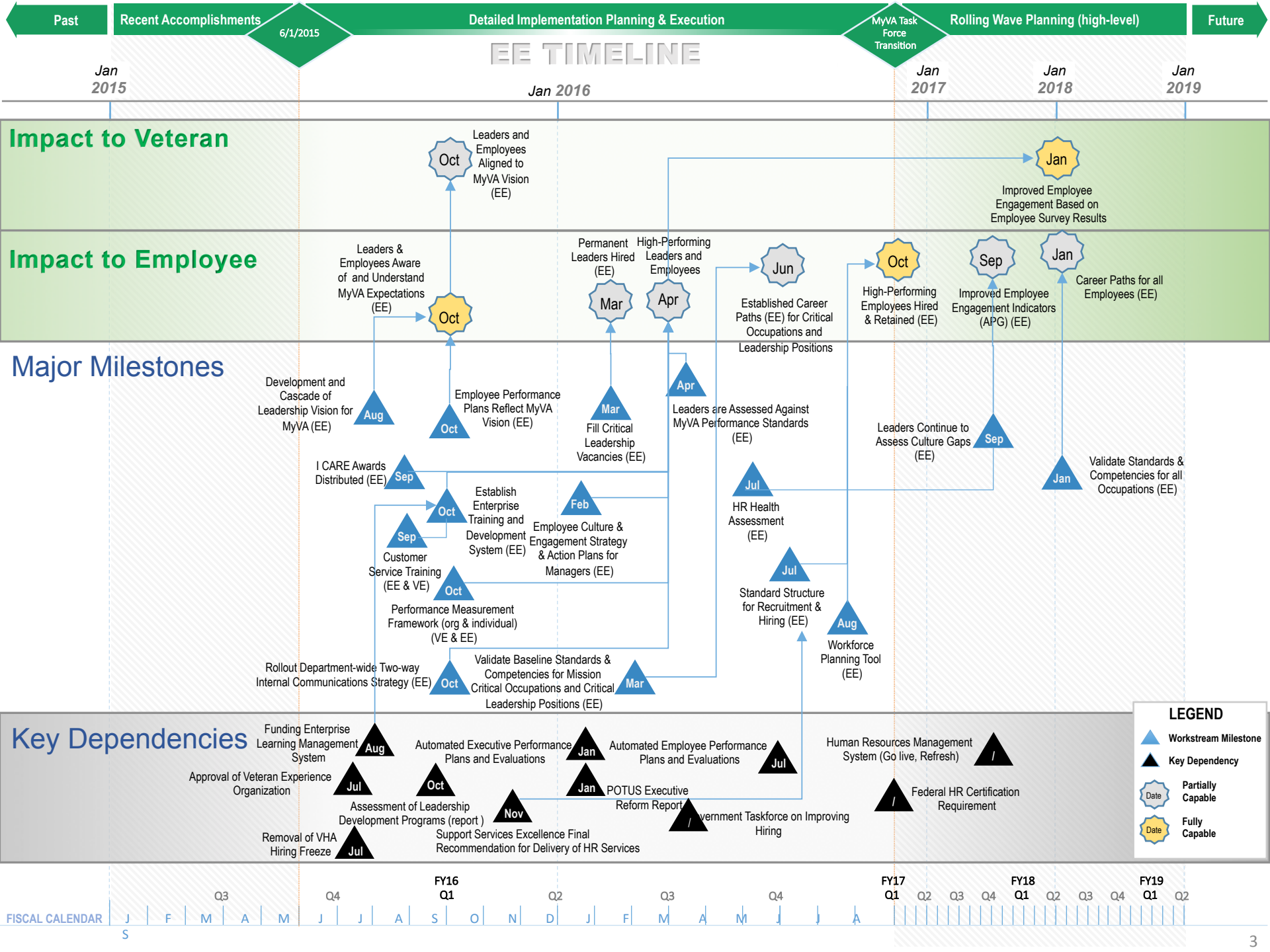
Furnished separately



MyVA Capability Timelines

Appendix F to MyVA Integrated Plan (MIP)
(July 30, 2015)





SSE TIMELINE

Jan
2015

Jan 2016

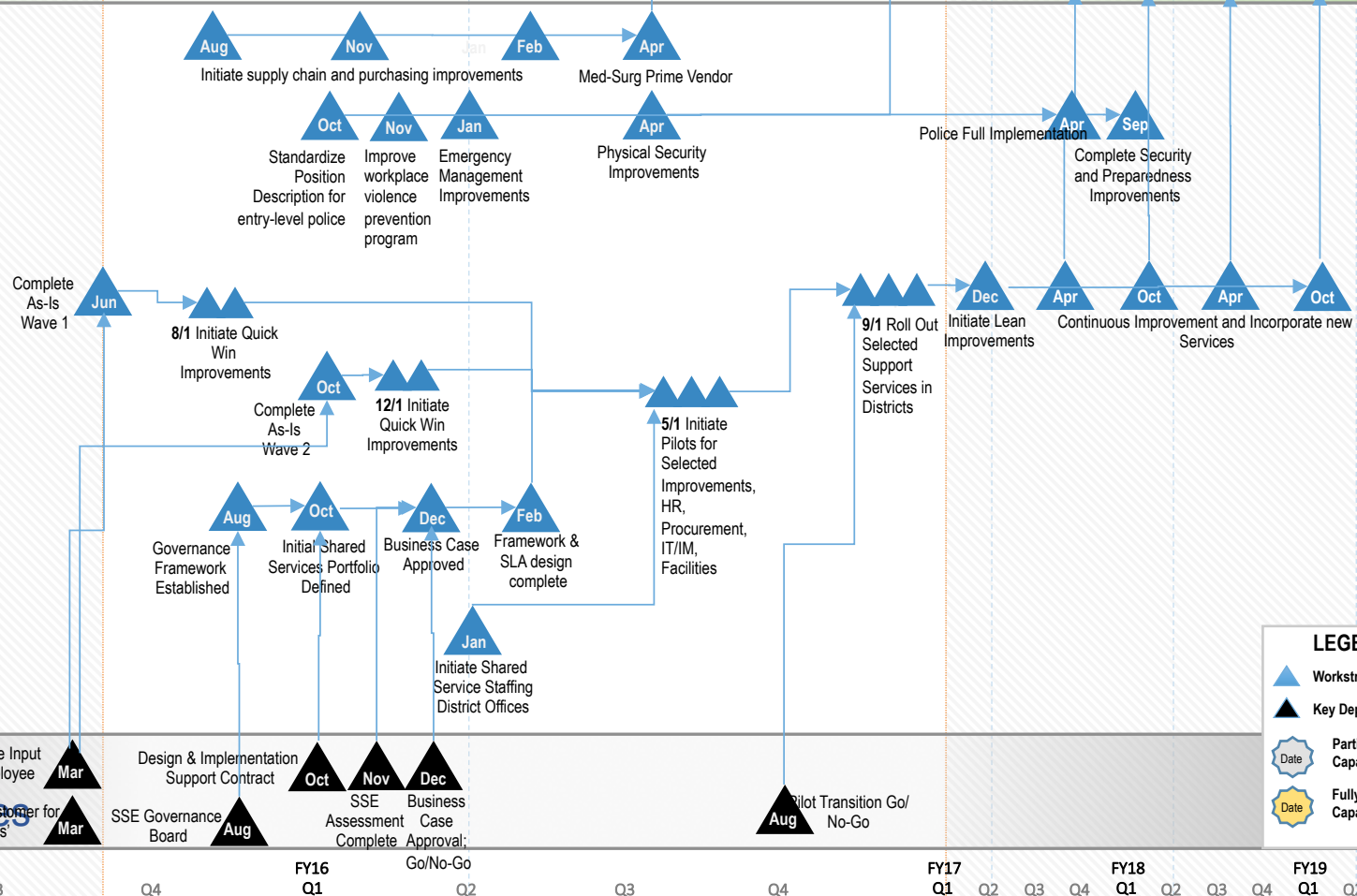
Jan
2017Jan
2018Jan
2019

Impact to Veteran

Impact to Employee

Major Milestones

Key Dependencies



LEGEND

Workstream Milestone

Key Dependency

Partially Capable

Date **Fully Capable**

FISCAL CALENDAR

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